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CITY OF SHEFFIELD
EDUCATION COMMITTEE

SCHOOL HEALTH SERVICE REPORT

OF THE

SCHOOL MEDICAL OFFICER,

HAROLD M. COHEN, M.D., D.P.H.

FOR THE YEAR ENDED 31ST DECEMBER, 1945
[THIRTY-EIGHTH YEAR]

CONTENTS

	PAGE
Staff	3, 7
Summary of work and general information ..	4
General review	7
Medical inspection	8
Infectious diseases	43
Nursery schools and classes	49
Handicapped children	50
Higher education for Handicapped students ..	56
Miscellaneous work	56
Statistical tables—Primary and Secondary ..	60

INDEX

	PAGE		PAGE
After care	54	Milk	20
Audiometric testing	29	Minor ailments and diseases	
Aural clinic	29	of the skin	26
Child guidance clinic	38	Nutrition	10
Cleanliness	22, 42	Ophthalmic treatment	28
Clinic attendances	62	Orthopædic treatment	35
Clothing and footwear	22	Orthoptic treatment	28
Co-operation of parents,		Parents' payments	59
teachers, &c.	48	Physical education	46
Co-ordination with other		Remand Home—Boys	57
Health Services	7	,, ,, Girls	57
Cost	63	Return of evacuees	41
Dental treatment	34	School hygiene	23
Diphtheria immunization	44	School meals	19
Ear, nose and throat defects	29	School nursing	41
Employment of children	58	Special examinations	58
Eye defects	28	Spectacles	28
Health education	56	Speech therapy	31
Heart diseases and rheumatism	36	Tuberculosis	37
Heights and weights	12-18	Vision	28
Inspection clinic	23		

CHILD WELFARE SUB-COMMITTEE

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Director of Education—STANLEY MOFFETT, M.C., M.A.

STAFF

School Medical Officer.

HAROLD M. COHEN, M.D., D.P.H.

Assistant School Medical Officers.

JOSEPH H. CAMPAIN, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H.	†EITHNE M. SWALLOW, B.A., M.B., B.Ch. (Temporary).
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WILLIAM D. A. KING, M.B., Ch.B.	ETHEL SKERRITT, M.D., M.R.C.S., L.R.C.P., D.P.H. (Temporary).
LINDSAY D. WILLIAMS, M.R.C.S., L.R.C.P., D.P.H.	MARY RHIND, M.R.C.S., L.R.C.P. (Temporary).
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‡CHARLES O. GREER, B.A., M.B., B.Ch.	

Specialist Officers.

Skin Section	*RUPERT HALLAM, M.D., M.R.C.P.
Ophthalmic Section	*EDITH HATHERLEY, M.B., Ch.B., D.O.M.S.
	*GEORGE E. ROBINSON, M.B., Ch.B., D.O.M.S.
	*ARTHUR SMITH, M.B., Ch.B., D.O.M.S.
Aural Section	*JOHN H. COBB, M.B., B.S., F.R.C.S.
Orthopædic Section	*FRANK W. HOLDSWORTH, B.A., M.Chir., F.R.C.S.
Rheumatism and Heart Section	*CUTHWIN H. BÖSENBERG, M.B., Ch.B.

School Dental Surgeons.

EDMUND A. REEVE, L.D.S., R.C.S.	‡OSWALD S. BENNETT, L.D.S., R.C.S.
MARY M. PELLATT, L.D.S., R.C.S.	‡ALBERT E. CLARKE, L.D.S.
ALFRED E. GIBBURN, L.D.S.	FLORENCE E. BIRKS, L.D.S. (Temporary).
AGNES M. THOSEBY, L.D.S.	EDITH M. WOODCOCK, L.D.S. (Temporary).

Child Guidance Clinic.

Medical Director—THE SCHOOL MEDICAL OFFICER.

NOEL E. WHILDE, B.Sc., A.B.Ps.S. (Educational Psychologist in charge).	HARRIETT B. HOTSON, M.A. (Psychiatric Social Worker).
KATHLEEN M. BENDALL, B.A., B.Ed. (Temporary Psychologist).	(One vacancy for Psychiatric Social Worker).
(Vacancy for part-time Psychiatrist).	
(Vacancy for full-time Educational Psychologist).	

School Nursing Staff

ELSIE C. CRUICKSHANK (Chief Nursing Sister),
and 31 Nursing Sisters, and 9 Nursing Assistants.

Bents Green Residential Open Air School ..

MARGARETTA W. LYON (Matron).

Ash House School

ELSIE JOHNSON (Matron).

Speech Therapists

JOAN POLLITT, L.C.S.T.

After-Care Officer

CHRISTINE J. COLLIER, L.C.S.T.

Clerical Staff

EDITH C. BAILEY.

Other Staff

REGINALD E. NORTH (Chief Clerk) and 26 Clerks
2 Dental Assistants, 9 Dental Attendants, 1 Dis-
penser and 2 part-time Orthoptists.

‡ On War Service.

* Part-time Officers.

† Seconded to Tuberculosis Services.

SCHOOL HEALTH SERVICE,

CENTRAL SCHOOL CLINIC : 7, Leopold Street, Sheffield, 1. (Telephone 26341).

December, 1945.

SUMMARY OF WORK, 1945

	Children.	Attend- ances.
SCHOOL MEDICAL OFFICERS AT SCHOOLS—		
Visits to Schools—	1,927	
Routine Inspection—		
Primary and Secondary Schools	11,366	
Special Schools	424	
Nursery Schools and Classes	2,372	
Selected cases	3,531	
“ Following up ”	4,201	
Special visits	11,498	
SCHOOL MEDICAL OFFICERS AT SCHOOL CLINICS—		
Inspection Clinic	17,521	33,452
Minor Ailment Clinic	26,169	44,288
OPHTHALMIC CLINIC—		
Treated by the Surgeons	4,839	9,159
Dressed by Nurses	2,001	11,941
Orthoptic Treatment	249	2,998
AURAL CLINIC—		
Treated by the Surgeon	662	743
Dressed by Nurses	2,625	26,546
DENTAL CLINIC—		
Inspected at schools	34,936	
Inspected at clinics	5,206	
Treated	15,041	24,288
ORTHOPÆDIC CLINIC—		
Examined by the Surgeon	481	696
RHEUMATISM AND HEART CLINIC—		
Examined by the Physician	552	1,105
CHILD GUIDANCE CLINIC	410	2,601
SPEECH THERAPY CLINIC	208	2,668
IMMUNIZATION AGAINST DIPHTHERIA—		
At schools and clinics	5,394	8,279
SCHOOL NURSING SISTERS AND NURSING ASSISTANTS—		
Examinations of children in schools	269,344	
Visits to homes	4,352	
Minor dressings at clinics and schools	17,603	112,314
TOTAL ATTENDANCES OF CHILDREN AT SCHOOLS AND CLINICS ..		281,078

CITY OF SHEFFIELD

GENERAL INFORMATION.

Population	474,100
Area	39,587 acres.
Density of Population	11·95 persons per acre.
Rateable Value	£3,405,011
Education Rate	60·22d.
Penny Rate produces	£13,330
Primary and Secondary Schools (including Nursery Schools)—	
Number of schools	126
Number of departments	207
Average number on rolls	63,779
Special Schools—	
Number of schools	12
Average number on rolls	1,019

CITY OF SHEFFIELD
EDUCATION COMMITTEE

SCHOOL HEALTH SERVICE

TO THE CHAIRMAN AND MEMBERS OF THE EDUCATION COMMITTEE.

I have the honour to present for your consideration, the report on the work of the School Health Service for the year ended 31st December, 1945.

The report continues to be brief in accordance with the request of the Ministry, and is in the main a factual record. Certain sections, however, describing innovations or special features, are dealt with more fully.

The year covers the period of cessation of hostilities both in Europe and in the Far East, and it is a matter of justifiable pride that the Handicapped Pupils and Health Service Regulations were issued early in the year under the Education Act, 1944. Notes on the various sections are mentioned in the relevant portions of this report. Also Circular 29 of the Ministry of Education was issued in March indicating the measures to be taken for extending the treatment schemes under the Local Authority, and for co-operation with hospitals so that pupils can obtain without charge all forms of treatment other than domiciliary treatment. Discussions with the hospitals have been deferred locally, pending negotiations at a national level.

Several categories of handicapped children are defined in the Regulations for whom special educational treatment is required. Further, part of the Regulations prescribing Standards for School Premises 1944, is devoted to special schools. A new era is indeed opening up for handicapped children. The needs of all the children in the Authority's schools, however, must be met and the alteration of the School Medical Service into the School Health Service should indicate a spirit of creative health.

During the year, increased accommodation was arranged for one of the categories of handicapped children, and it is gratifying to note that the Committee has given attention to this problem which is emphasised in the new Regulations.

As far as can be judged objectively, the health of the children has been very satisfactory during the year.

After many years of office as Chairman of the School Medical Service Sub-Committee, Alderman Bancroft retired from the City Council in November. It seems fitting that tribute should be paid to his willing help and encouragement, and the sincerity of his purpose in the interests of the children.

It is a pleasure again to acknowledge the continued support and keen interest of the Chairman and Members of the Committee in the welfare of the children ; the consideration and ready help of Mr. Moffett, the Director of Education, and the staff of the various departments, their help in the preparation of certain sections of the report, and the continued keenness and loyal collaboration of the staff of the School Health Service during an eventful year.

May, 1946.

H. M. COHEN,
School Medical Officer.

STAFF

Dr. Lindsay Williams, who had been serving with H.M. Forces from the outbreak of war, returned in October. Dr. Heathcote, who had given valuable service at intervals since his retirement on superannuation, accordingly resigned.

The dental staff was further depleted during the year by the resignation of Mr. Taylor in March and Mr. Walmsley in April. For the remainder of the year the dental service was five dental surgeons short.

Sister F. A. Williams retired on superannuation in September after 18 years excellent service, and Sister D. V. Beeching, with 22 years excellent service to her credit, retired on superannuation in November, 1945. Sister E. K. Finerty returned from military service in October. There were various resignations amongst the School Nursing Sisters, but all except three vacancies were successfully filled by the end of the year.

At the Child Guidance Clinic, Dr. Cobb, Psychiatrist, resigned in October, and the vacancy has not yet been filled. The vacancy for a Psychiatric Social Worker was filled by the appointment of Miss Hotson, M.A., in September, but Miss Nicholson, the other Psychiatric Social Worker, resigned in December.

Mrs. E. Stuart, After-Care Officer, resigned in March and Miss E. C. Bailey was appointed to fill the vacancy in April.

Mr. W. F. Hern, Clerk, returned in October after serving with H.M. Forces from the outbreak of war.

CO-ORDINATION

A full review of the inter-availability service between the Health Department and the School Health Service has been given previously.

Treatment of pre-school children at the various school clinics :—

Treatment given—								Cases		Attendances.
Dental	..	..	..	..	..	..	..	94	..	107
Aural	..	..	..	..	..	..	..	31	..	73

GENERAL REVIEW.

The general standard of health amongst the school children was very fair throughout the war period, and during the past year there appears to have been a definite improvement. Medical Officers who worked during the year in districts which they had not visited for some time were markedly impressed by the good condition of the children. Earlier in the war years, mention was made that there was a lowering of resistance to infection, but reports for the past year indicate that resistance has been much improved. The policy of the Ministry of Food, which resulted in special care being

given to the younger section of the population, together with the availability of school dinners and milk, have evidently shown good results and it is a matter for congratulation that this section of the population has passed through such a testing period so favourably.

Yet in the same way that neurosis appears to have increased among the adult population, so there is, apparently, amongst the school children an increase in the number of cases of asthma, which so often has a psychological basis.

It is pleasant to note that there has been a marked decrease in parental neglect, which tended to increase during the war years.

MEDICAL INSPECTION

Under the 1945 Regulations, arrangements are to be made for the medical inspection of pupils—

- (a) as soon as possible after the date of their admission to a maintained school for the first time ;
- (b) during the last year of their attendance at a maintained Primary School ;
- (c) during the last year of their attendance at a maintained Secondary School.

During the past year the first and third category have been medically inspected and as the staff become available, the second category will be included. As the Regulation only came into force in the latter part of the year, the table is given showing the results of the “ survey system ” as compared with the “ routine ” examination of the eight years old group. This age group was known as the “ Intermediate Group ” and is to be replaced by the group of pupils in their last year in the Primary School mentioned above. As this comparison will not appear again it may be stated here that the continuous health survey outlined in previous reports has been successful.

INTERMEDIATE GROUP

(EXCLUDING UNCLEANLINESS, DENTAL AND DEFECTIVE VISION).

CONDITION	Routine Examin- ations 1941	“Specials” 1941	SELECTED FOLLOWING “SURVEY.”					
			Treat- ment 1943	Obser- vation 1943	Treat- ment 1944	Obser- vation 1944	Treat- ment 1945	Obser- vation 1945
Malnutrition	4	2	1	1	2	3	3	—
Ringworm—body	—	—	1	1	—	—	—	—
Scabies	7	1	3	—	6	1	—	—
Impetigo	3	2	3	—	4	—	4	—
Other skin conditions ..	11	5	26	2	17	4	8	2
Blepharitis	3	2	2	—	1	1	5	1
Conjunctivitis	3	2	6	—	2	—	1	—
Other eye conditions ..	2	—	3	1	2	—	3	1
Squint	5	10	14	9	13	24	6	7
Not wearing glasses, etc. ..	2	1	10	6	16	6	10	10
Defective hearing	6	1	7	7	7	4	11	6
Other ear diseases	13	—	3	—	2	4	7	1
Discharging ears	—	—	2	—	6	7	6	1
Enlarged tonsils	22	5	26	14	26	13	11	10
Adenoids	3	1	3	2	5	3	2	4
Tonsils and adenoids ..	27	1	16	2	9	5	4	2
Other nose and throat con- ditions	2	—	6	6	14	11	8	3
Enlarged glands	5	1	9	7	—	7	2	1
Speech defects	1	—	8	4	2	5	5	3
Heart—organic	1	—	—	4	—	4	3	4
„ functional	1	—	—	—	—	2	—	2
Anæmia	1	2	3	8	5	16	7	3
Bronchitis	10	1	4	3	2	3	4	3
Other lung conditions ..	—	—	—	3	—	—	—	—
Debility	3	5	3	6	6	12	4	6
Tuberculosis of hip	—	—	—	1	—	—	—	—
„ other bones and joints	—	—	—	1	1	1	—	—
Epilepsy	—	1	1	2	—	2	2	—
Chorea	4	—	1	5	4	2	1	—
Other nervous conditions ..	2	—	—	6	—	5	—	4
Rickets	1	1	2	—	1	—	—	—
Spinal curvature	3	1	—	—	—	—	—	—
Other defects and diseases	35	10	14	16	24	16	14	17
	180	55	177	117	177	161	131	91

The main statistics on medical inspection will be found in Table I, page 60.

The arrears in school visits have increased mainly through shortage of medical staff, the increasing time given to the ascertainment of educationally subnormal pupils and the examination of the children in the nursery classes. Mention must also be made of the sessions given to diphtheria immunization.

The number of children (1944 figures in brackets) found to require treatment at the routine examination for various defects was 958 (1,251) and 303 (609) letters were sent to parents, advising them of these conditions. The remainder were referred to the clinics. In addition, 928 (1,060) children were referred for further medical supervision.

At the “follow up” examinations, which take place approximately six months after the routine medical inspections, 4,201 (5,935) children were examined.

There were 3,531 (4,510) cases selected at the survey inspection and 805 (1,175) were found to require treatment. Letters were sent to 413 (552) parents of these children advising them to obtain the requisite treatment, whilst further supervision was required for 565 (470).

The percentage of the two routine groups requiring treatment (excluding defects of nutrition, uncleanness and dental diseases) were as follows :—

Entrants .. ..	..	..	..	11.6	(11.1)
Leavers .. ..	..	..	..	9.7	(9.9)

NUTRITION

The evaluation of the nutritional state of the children examined as routines at the various age groups is shown below, compared with the figures for 1944 and 1938. The figures for England and Wales for 1938, which are the latest available, are also given.

Age Groups—				Number		Slightly		
Year.				examined.	Excellent. %	Normal. %	sub-normal. %	Bad. %
Entrants	1945 ..	5,777	19·62	67·71	12·27	·38		
	1944 ..	7,793	20·73	67·67	11·42	·16		
	1938 ..	6,792	12·53	75·50	11·88	·08		
Intermediates ..	1945 ..	181	14·91	72·37	12·70	—		
	1944 ..	244	19·26	72·13	8·60	—		
	1938 ..	6,657	12·96	70·68	16·18	·18		
Leavers	1945 ..	2,968	21·66	63·47	14·55	·30		
	1944 ..	3,318	21·30	65·64	12·92	·12		
	1938 ..	6,698	18·59	68·78	12·58	·04		
Total	1945 ..	8,926	20·21	66·40	13·04	·34		
	1944 ..	11,355	20·87	67·17	11·80	·14		
	1938 ..	20,341	14·64	71·68	13·57	·10		
Total for England and Wales		1938 ..	1,674,023	14·5	74·2	10·8		

These findings would seem to indicate that, generally speaking, the nutrition in these age groups of the children has been well maintained, although again the writer must state there is no absolute yard-stick with which to measure nutrition, and that the assessment is clinical and individually subjective in its approach.

Corroboration of the general satisfactory state of Sheffield school children is shown by the findings of a medical officer from the Ministry of Health. 464 boys and 455 girls were examined, of ages ranging from 8 to 17. The survey was carried out in October 1945, and the schools selected were as representative as possible. It was assumed that these children were a fair sampling of a cross-section of the school children of the City. The children were weighed and measured and assessments of nutritional status were made, and there was a search for evidence of deficiency disease—a slit-lamp, special tuning fork and other clinical aids being used.

The medical officer reported that the nutritional status of the boys was good, and was well above the average of those examined in other parts of the country. Gingivitis was the only one of the signs above average in incidence. It

was of a simple marginal type and was more likely to be an indication of careless hygiene than of nutritional deficiency. The nutritional status of the girls was very good, better in fact than that of the boys, and considerably above the average of those examined elsewhere. The incidence of all the signs was below average.

It is interesting to note further that the percentage of children in this unselected sample taking the school dinner and milk was 62·3 and 83·2; the dinner percentage was about double the average elsewhere and pays tribute to those who undertake the work of the service. There was no appreciable difference in the percentages of those "good" and "fair" between those who did and did not take the dinner and milk. It is interesting to note, however, that of the sample of 919 children, only 0·3 per cent. showed the combination of fair nutrition and the non-taking of both school dinner and milk, indicating that practically all those whose condition showed possible need of dietary supplement, were obtaining it either as dinner or milk or both.

Heights and weights are associated with nutrition and perusal of the accompanying tables is of some interest. Compared with last year there have been slight increases and decreases. In one group only, however, has the decrease been significant, whilst there have been significant increases in several groups.

HEIGHTS

SHEFFIELD PRIMARY AND SECONDARY SCHOOLS (OTHER THAN GRAMMAR SCHOOLS)

BOYS										GIRLS								
Age	Board of Education Standard 1928	1920	1928	1938	1943	1944	1945	No. Examined 1945		Age	Board of Education Standard 1928	1920	1928	1938	1943	1944	1945	No. Examined 1945
5	41.4	40.5	41.3	42.44	43.14	42.76	42.93	2,019		5	41.1	40.75	41.5	42.13	42.86	42.46	42.64	1,874
6	43.0	42.75	44.6	44.76	45.21	44.85	44.77	642		6	42.8	42.45	43.4	44.25	44.96	44.36	44.63	588
7	45.4	44.4	45.85	47.09	47.18	46.86	46.98	130		7	45.1	44.05	46.1	46.77	46.76	46.52	46.59	118
8	47.8	46.9	48.3	49.21	49.60	48.75	49.84	22		8	47.5	46.9	47.85	48.86	48.77	48.34	48.85	25
9	49.2	48.45	49.7	50.47	51.54	52.32	50.38	22		9	48.9	47.95	49.9	50.39	51.11	51.12	51.22	27
10	51.3	49.8	50.55	52.28	53.70	53.07	54.31	20		10	51.2	50.25	50.75	52.13	53.56	52.48	54.38	15
11	52.7	53.55	52.6	53.98	56.87	54.46	54.91	36		11	52.8	51.1	53.5	55.28	55.06	56.74	55.62	14
12	55.0	54.05	55.1	56.42	56.50	56.54	56.44	103		12	55.6	54.5	56.5	57.52	57.98	57.10	57.96	85
13	56.2	55.7	56.2	57.91	59.02	58.85	59.10	1,134		13	56.9	56.05	57.6	58.9	59.96	59.90	60.02	1,256
14	58.0	56.45	57.9	59.8	60.68	60.35	60.38	182		14	58.9	57.0	58.3	60.75	60.45	60.92	60.90	194

WEIGHTS

SHEFFIELD PRIMARY AND SECONDARY SCHOOLS (OTHER THAN GRAMMAR SCHOOLS)

BOYS												GIRLS					
Age	Board of Education Standard 1928 Pounds	1920 Pounds	1928 Pounds	1938 Pounds	1943 Pounds	1944 Pounds	1945 Pounds	No. Examined 1945	Age	Board of Education Standard 1928 Pounds	1920 Pounds	1928 Pounds	1938 Pounds	1943 Pounds	1944 Pounds	1945 Pounds	No. Examined 1945
5	38.7	38.6	42.65	41.49	42.25	41.55	41.58	2,019	5	37.5	38.9	38.8	39.93	40.96	40.18	40.18	1,874
6	41.3	42.2	44.6	45.72	46.40	45.50	44.95	642	6	40.1	40.45	42.3	43.87	44.77	43.97	43.71	588
7	45.4	45.1	48.2	51.1	50.87	49.68	49.77	130	7	44.4	42.1	47.7	49.12	48.59	48.34	47.62	118
8	51.0	50.15	53.3	56.17	56.83	53.47	57.12	22	8	49.4	49.05	51.8	54.17	54.55	52.48	54.41	25
9	54.8	52.25	57.75	60.0	62.17	64.19	61.73	22	9	52.6	52.2	55.65	58.0	59.30	59.05	59.12	27
10	59.6	57.7	60.65	64.29	66.44	70.17	74.52	20	10	59.8	53.4	59.5	63.8	68.83	65.98	67.61	15
11	64.6	68.2	64.9	70.86	75.18	70.73	73.49	36	11	63.9	61.75	70.95	75.44	72.05	79.50	77.48	14
12	71.6	70.4	74.95	80.14	82.77	80.29	79.35	103	12	73.9	71.05	77.5	83.47	82.39	81.78	85.85	85
13	76.5	73.75	80.0	85.61	89.60	89.96	90.07	1,134	13	79.0	77.35	83.4	89.66	94.70	95.61	96.04	1,256
14	86.1	79.55	84.4	94.14	95.70	96.48	95.16	182	14	88.2	78.95	90.0	100.5	98.56	100.66	99.65	194

DETAILS OF 1944 MEASUREMENTS COMPARED WITH 1945

PRIMARY AND SECONDARY SCHOOLS (other than Grammar Schools). HEIGHT—BOYS (IN INCHES).

Age	No. of boys	1944 Mean \pm S.E.	S.D.	No. of boys	1945 Mean \pm S.E.	S.D.	Difference \pm S.E. 1945-1944	Ratio = $\frac{\text{Difference}}{\text{S.E.}}$
5	2777	42.76 \pm 0.038	1.98	2019	42.93 \pm 0.045	2.01	+0.17 \pm 0.059	3
6	680	44.85 \pm 0.088	2.29	642	44.77 \pm 0.081	2.06	-0.08 \pm 0.120	-1
7	205	46.86 \pm 0.161	2.30	130	46.98 \pm 0.194	2.21	+0.12 \pm 0.252	0
8	47	48.75 \pm 0.350	2.40	22	49.84 \pm 0.535	2.51	+1.09 \pm 0.639	2
9	34	52.32 \pm 0.587	3.42	22	50.38 \pm 0.676	3.17	-1.94 \pm 0.895	-2
10	29	53.07 \pm 0.771	4.15	20	54.31 \pm 0.569	2.55	+1.24 \pm 0.958	1
11	12	54.46 \pm 0.808	2.80	36	54.91 \pm 0.358	2.15	+0.45 \pm 0.884	1
12	108	56.54 \pm 0.242	2.51	103	56.44 \pm 0.252	2.55	-0.10 \pm 0.349	0
13	1367	58.85 \pm 0.091	3.37	1134	59.10 \pm 0.093	3.14	+0.25 \pm 0.130	2
14	127	60.35 \pm 0.315	3.55	182	60.38 \pm 0.244	3.29	+0.03 \pm 0.398	0

PRIMARY AND SECONDARY SCHOOLS (other than Grammar Schools). WEIGHT—BOYS (IN POUNDS).

Age	No. of boys	1944 Mean \pm S.E.	S.D.	No. of boys	1945 Mean \pm S.E.	S.D.	Difference \pm S.E. 1945-1944	Ratio = $\frac{\text{Difference}}{\text{S.E.}}$
5	2777	41.55 \pm 0.099	5.22	2019	41.58 \pm 0.105	4.71	+0.03 \pm 0.144	0
6	680	45.50 \pm 0.215	5.61	642	44.95 \pm 0.204	5.16	-0.55 \pm 0.296	-2
7	205	49.68 \pm 0.400	5.72	130	49.77 \pm 0.522	5.96	+0.09 \pm 0.658	0
8	47	53.47 \pm 1.018	6.98	22	57.12 \pm 1.421	6.66	+3.65 \pm 1.748	+2
9	34	64.19 \pm 2.368	13.81	22	61.73 \pm 1.841	8.63	-2.46 \pm 2.999	-1
10	29	70.17 \pm 2.938	15.82	20	74.52 \pm 2.532	11.32	+4.35 \pm 3.879	+1
11	12	70.73 \pm 3.204	11.10	36	73.49 \pm 1.950	11.70	+2.76 \pm 3.751	+1
12	108	80.29 \pm 1.032	10.72	103	79.35 \pm 1.078	10.94	-0.94 \pm 1.492	-1
13	1367	89.96 \pm 0.437	16.17	1134	90.07 \pm 0.477	16.07	+0.11 \pm 0.647	0
14	127	96.48 \pm 1.611	18.16	182	95.16 \pm 1.349	18.20	-1.32 \pm 2.101	-1

PRIMARY AND SECONDARY SCHOOLS (other than Grammar Schools). HEIGHT—GIRLS (IN INCHES).

Age	No. of girls	1944 Mean \pm S.E.	S.D.	No. of girls	1945 Mean \pm S.E.	S.D.	Difference \pm S.E. 1945-1944	Ratio = $\frac{\text{Difference}}{\text{S.E.}}$
5	2728	42.46 \pm 0.038	1.99	1874	42.64 \pm 0.045	1.96	+0.18 \pm 0.059	3
6	683	44.36 \pm 0.085	2.21	588	44.63 \pm 0.085	2.07	+0.27 \pm 0.120	2
7	224	46.52 \pm 0.161	2.41	118	46.59 \pm 0.186	2.02	+0.07 \pm 0.246	0
8	41	48.34 \pm 0.406	2.60	25	48.85 \pm 0.499	2.49	+0.51 \pm 0.643	1
9	37	51.12 \pm 0.329	2.00	27	51.22 \pm 0.537	2.79	+0.10 \pm 0.630	0
10	27	52.48 \pm 0.525	2.73	15	54.38 \pm 0.650	2.52	-0.10 \pm 0.836	0
11	17	56.74 \pm 0.829	3.42	14	55.62 \pm 0.839	3.14	-1.12 \pm 1.179	-1
12	126	57.10 \pm 0.307	3.45	85	57.96 \pm 0.297	2.74	+0.86 \pm 0.427	2
13	1433	59.90 \pm 0.076	2.86	1256	60.02 \pm 0.078	2.76	+0.12 \pm 0.109	1
14	140	60.92 \pm 0.232	2.74	194	60.90 \pm 0.197	2.75	-0.02 \pm 0.304	0

PRIMARY AND SECONDARY SCHOOLS (other than Grammar Schools). WEIGHT—GIRLS (IN POUNDS).

Age	No. of girls	1944 Mean \pm S.E.	S.D.	No. of girls	1945 Mean \pm S.E.	S.D.	Difference \pm S.E. 1945-1944	Ratio = $\frac{\text{Difference}}{\text{S.E.}}$
5	2728	40.18 \pm 0.095	4.94	1874	40.18 \pm 0.113	4.91	00.0 \pm 0.148	0
6	683	43.97 \pm 0.217	5.66	588	43.71 \pm 0.232	5.62	-0.26 \pm 0.318	-1
7	224	48.34 \pm 0.426	6.38	118	47.62 \pm 0.492	5.35	-0.72 \pm 0.651	-1
8	41	52.48 \pm 1.242	7.95	25	54.41 \pm 2.027	10.14	+1.93 \pm 2.377	1
9	37	59.05 \pm 1.238	7.53	27	59.12 \pm 1.566	8.14	+0.07 \pm 1.996	0
10	27	65.98 \pm 2.794	14.52	15	67.61 \pm 3.289	12.74	+1.63 \pm 4.316	0
11	17	79.50 \pm 4.317	17.80	14	77.48 \pm 3.880	14.52	-2.02 \pm 5.804	0
12	126	81.78 \pm 1.429	16.04	85	85.85 \pm 2.020	18.62	+4.07 \pm 2.474	2
13	1433	95.61 \pm 0.451	17.06	1256	96.04 \pm 0.474	16.80	+0.43 \pm 0.654	1
14	140	100.66 \pm 1.409	16.67	194	99.65 \pm 1.150	16.01	-1.01 \pm 1.819	-1

S.E. = Standard error

S.D. = Standard deviation

GRAMMAR SCHOOLS COMPARED WITH OTHER TYPES OF
SECONDARY SCHOOLS, 1945

As it has been the custom to evaluate the records of the Grammar Schools separately, the information is again given as it is available and is of some possible interest. There may be a hint of correlation in these findings between the factors governing the selection of these children and their physique. It will be noted that the Grammar School pupils are taller and heavier generally than the pupils in the other schools, being more noticeable in the boys than in the girls. Comparing the Grammar School pupils, however, of 1945 with those of 1944, the former show, in the main, a general decrease.

HEIGHT (IN INCHES)—BOYS, 1945.

Age	GRAMMAR SCHOOLS			SECONDARY SCHOOLS			Difference \pm S.E. Gram. sch. —Sec. sch.	Ratio = $\frac{\text{Difference}}{\text{S.E.}}$
	No. of boys	Mean \pm S.E.	S.D.	No. of boys	Mean \pm S.E.	S.D.		
11	332	56.04 \pm 0.145	2.65	36	54.91 \pm 0.358	2.15	+1.13 \pm 0.386	3
12	158	57.91 \pm 0.219	2.75	103	56.44 \pm 0.252	2.55	+1.47 \pm 0.334	4
13	218	59.80 \pm 0.222	3.28	1134	59.10 \pm 0.093	3.14	+0.70 \pm 0.241	3
14	92	62.21 \pm 0.389	3.73	182	60.38 \pm 0.244	3.29	+1.83 \pm 0.459	4

WEIGHT (IN POUNDS)—BOYS, 1945.

Age	GRAMMAR SCHOOLS			SECONDARY SCHOOLS			Difference \pm S.E. Gram. sch. —Sec. sch.	Ratio = $\frac{\text{Difference}}{\text{S.E.}}$
	No. of boys	Mean \pm S.E.	S.D.	No. of boys	Mean \pm S.E.	S.D.		
11	332	76.59 \pm 0.635	11.58	36	73.49 \pm 1.950	11.70	+3.10 \pm 2.051	2
12	158	84.03 \pm 1.105	13.89	103	79.35 \pm 1.078	10.94	+4.68 \pm 1.544	3
13	218	93.96 \pm 1.168	17.25	1134	90.07 \pm 0.477	16.07	+3.89 \pm 1.262	3
14	92	105.30 \pm 2.026	19.43	182	95.16 \pm 1.349	18.20	+10.14 \pm 2.434	4

HEIGHT (IN INCHES)—GIRLS, 1945.

Age	GRAMMAR SCHOOLS			SECONDARY SCHOOLS			Difference \pm S.E. Gram. sch. —Sec. sch.	Ratio = $\frac{\text{Difference}}{\text{S.E.}}$
	No. of girls	Mean \pm S.E.	S.D.	No. of girls	Mean \pm S.E.	S.D.		
11	354	56.32 \pm 0.141	2.65	14	55.62 \pm 0.839	3.14	+0.70 \pm 0.851	1
12	141	57.40 \pm 0.246	2.92	85	57.96 \pm 0.297	2.74	-0.56 \pm 0.386	-1
13	50	60.54 \pm 0.410	2.90	1256	60.02 \pm 0.078	2.76	+0.52 \pm 0.417	1
14	25	61.81 \pm 0.606	3.03	194	60.90 \pm 0.197	2.75	+0.91 \pm 0.637	1

WEIGHT (IN POUNDS)—GIRLS, 1945.

Age	GRAMMAR SCHOOLS			SECONDARY SCHOOLS			Difference \pm S.E. Gram. sch. —Sec. sch.	Ratio = $\frac{\text{Difference}}{\text{S.E.}}$
	No. of girls	Mean \pm S.E.	S.D.	No. of girls	Mean \pm S.E.	S.D.		
11	354	79.60 \pm 0.723	13.60	14	77.48 \pm 3.880	14.52	+2.12 \pm 3.947	1
12	141	83.89 \pm 1.319	15.66	85	85.85 \pm 2.020	18.62	-1.96 \pm 2.413	-1
13	50	100.27 \pm 2.672	18.89	1256	96.04 \pm 0.474	16.80	+4.23 \pm 2.714	2
14	25	102.56 \pm 4.220	21.10	194	99.65 \pm 1.150	16.01	+2.91 \pm 4.374	1

S.E. = Standard error

S.D. = Standard deviation

HEIGHTS AND WEIGHTS
SHEFFIELD GRAMMAR SCHOOL CHILDREN.

HEIGHTS

Age	BOYS					GIRLS						
	Board of Education Standard 1928	1920	1928	1938	1943	1944	1945	1945	No. Exam.	1945	1944	1945
	Inches	Inches	Inches	Inches	Inches	Inches	Inches	Inches				
12	55.0	56.3	57.5	57.92	57.69	55.15	57.91	56.75	158	57.40	58.41	57.40
13	56.2	57.55	58.3	59.0	60.58	60.24	59.80	58.4	218	60.54	61.19	60.54
15	61.8	65.1	64.45	65.25	65.98	65.68	65.94	61.8	463	63.27	63.24	63.27
16	66.0	64.55	—	66.17	67.09	66.65	—	62.3	—	—	63.20	—

WEIGHTS

Age	BOYS					GIRLS						
	Board of Education Standard 1928	1920	1928	1938	1943	1944	1945	1945	No. Exam.	1945	1944	1945
	Pounds	Pounds	Pounds	Pounds	Pounds	Pounds	Pounds	Pounds				
12	71.6	76.6	82.5	86.9	83.38	85.48	84.03	73.9	158	83.89	86.68	83.89
13	76.5	82.8	87.8	90.0	96.49	96.94	93.96	79.0	218	100.27	100.25	100.27
15	99.3	117.85	117.15	119.25	124.62	123.26	124.11	106.8	463	118.30	117.70	118.30
16	118.0	119.8	—	126.1	131.18	129.75	—	106.5	—	—	119.93	—

DETAILS OF 1944 MEASUREMENTS COMPARED WITH 1945

GRAMMAR SCHOOLS. HEIGHT—BOYS (IN INCHES).

Age	No. of boys	1944 Mean \pm S.E.	S.D.	No. of boys	1945 Mean \pm S.E.	S.D.	Difference \pm S.E. 1945-1944	Ratio = $\frac{\text{Difference}}{\text{S.E.}}$
11	397	56.33 \pm 0.123	2.46	332	56.04 \pm 0.145	2.65	-0.29 \pm 0.190	-2
12	129	58.15 \pm 0.216	2.45	158	57.91 \pm 0.219	2.75	-0.24 \pm 0.308	-1
13	339	60.24 \pm 0.157	2.89	218	59.80 \pm 0.222	3.28	-0.44 \pm 0.272	-2
14	98	62.36 \pm 0.378	3.74	92	62.21 \pm 0.389	3.73	-0.15 \pm 0.542	0
15	245	65.68 \pm 0.201	3.15	463	65.94 \pm 0.138	2.97	+0.26 \pm 0.244	1

GRAMMAR SCHOOLS. WEIGHT—BOYS (IN POUNDS).

Age	No. of boys	1944 Mean \pm S.E.	S.D.	No. of boys	1945 Mean \pm S.E.	S.D.	Difference \pm S.E. 1945-1944	Ratio = $\frac{\text{Difference}}{\text{S.E.}}$
11	397	79.07 \pm 0.569	11.33	332	76.59 \pm 0.635	11.58	-2.48 \pm 0.853	-3
12	129	85.48 \pm 1.191	13.53	158	84.03 \pm 1.105	13.89	-1.45 \pm 1.625	-1
13	339	96.94 \pm 0.922	16.98	218	93.96 \pm 1.168	17.25	-2.98 \pm 1.488	-2
14	98	107.51 \pm 2.233	22.11	92	105.30 \pm 2.026	19.43	-2.21 \pm 3.015	-1
15	245	123.26 \pm 1.271	19.90	463	124.11 \pm 0.860	18.50	+0.85 \pm 1.535	1

GRAMMAR SCHOOLS. HEIGHT—GIRLS (IN INCHES).

Age	No. of girls	1944 Mean \pm S.E.	S.D.	No. of girls	1945 Mean \pm S.E.	S.D.	Difference \pm S.E. 1945-1944	Ratio = $\frac{\text{Difference}}{\text{S.E.}}$
11	353	56.75 \pm 0.150	2.82	354	56.32 \pm 0.141	2.65	-0.43 \pm 0.206	-2
12	69	58.41 \pm 0.358	2.97	141	57.40 \pm 0.246	2.92	-1.01 \pm 0.434	-2
13	295	61.19 \pm 0.154	2.65	50	60.54 \pm 0.410	2.90	-0.65 \pm 0.438	-1
14	75	61.65 \pm 0.343	2.97	25	61.81 \pm 0.606	3.03	+0.16 \pm 0.696	0
15	199	63.24 \pm 0.175	2.47	320	63.27 \pm 0.125	2.24	+0.03 \pm 0.215	0
16	60	63.20 \pm 0.275	2.13	62	63.12 \pm 0.281	2.21	-0.08 \pm 0.393	0

GRAMMAR SCHOOLS. WEIGHT—GIRLS (IN POUNDS).

Age	No. of girls	1944 Mean \pm S.E.	S.D.	No. of girls	1945 Mean \pm S.E.	S.D.	Difference \pm S.E. 1945-1944	Ratio = $\frac{\text{Difference}}{\text{S.E.}}$
11	353	78.74 \pm 0.698	13.11	354	79.60 \pm 0.723	13.60	+0.86 \pm 1.005	1
12	69	86.68 \pm 1.912	15.88	141	83.89 \pm 1.319	15.66	-2.79 \pm 2.323	-1
13	295	100.25 \pm 1.013	17.40	50	100.27 \pm 2.672	18.89	+0.02 \pm 2.858	0
14	75	105.65 \pm 2.464	21.34	25	102.56 \pm 4.220	21.10	-3.09 \pm 4.887	-1
15	199	117.70 \pm 1.024	14.45	320	118.30 \pm 0.941	16.84	+0.60 \pm 1.391	0
16	60	119.93 \pm 1.738	13.46	62	120.22 \pm 2.122	16.71	+0.29 \pm 2.743	0

S.E. = Standard error.

S.D. = Standard deviation.

A further analysis has again been attempted to ascertain the effect of meals given at schools on the growth of the children. The heights and weights of 1,408 boys and 1,396 girls of ages falling between 5 and 15 were measured in 1945.

It is realised that a large number of factors (such as home conditions and intervening illness) known to affect the growth rate are left out of control. The height and weight increases, and not actual heights and

weights, were used for this investigation. It is known that annual weight increases are higher for older children, whilst amongst children of the same age, the bigger children usually exceed the smaller in their annual weight and height increases.

Accordingly, the boys and girls were separately classified in the following main groups :—

' Young '	ages 5—8
' Medium '	ages 9—11
' Old '	ages 12—15

Each of these six main groups was further subdivided into a number of groups according to the weight attained in 1944.

Finally, each of these groups was further subdivided into three sub-groups :—" Not on meals," " Paid " and " Free."

As the analysis shows the number of children on free meals occurred infrequently in the sub-groups, it is not possible again to give any comparison for them.

The gains of children in the same age group and in the same initial weight group have been compared and the difference between the average gains in the children paying for meals and those not having meals were calculated.

The results this year show that the superiority of increase in weight of the " Paid meals " group although small is consistent and taken as a whole is significant. Amongst the individual groups " Old Girls " and " Medium Boys " show a significant result.

For height difference no superiority of the " Paid meals " group over the " No meal " group could be detected.

As a tailpiece to this section, it is interesting to note that an informative review of the nutrition of the country in the light of information gained during the war has lately been made by Dr. Magee of the Ministry of Health.¹ He points out that the war-time food policy was the first large-scale application of the science of nutrition to the population of the United Kingdom.

" This application was brought about by home production and importation of suitable foods in suitable amounts, by rationing according to needs, by subsidies on staple foods, and by adequate wages. A diet more than ever before in conformity with physiological requirements became available to everyone, irrespective of income."

Dr. Magee, after reviewing the extensive evidence, concludes that the policy achieved a large measure of success.

¹ *British Medical Journal*, March 30th, 1946.

SCHOOL MEALS

A full description of the arrangements for school meals has been given in previous reports. The dietetic principles remain of foremost importance. The following statistics to the end of the year show the continued high proportion of children partaking of school meals.

Particulars of the average number of meals supplied daily in respect of each calendar month from January to December, 1945 :—

1945	PRIMARY AND SECONDARY SCHOOLS (not including Grammar Schools)		GRAMMAR SCHOOLS		TOTALS
	Free	Paid	Free	Paid	
January	4,600	20,608	141	4,924	30,273
February	4,812	19,982	128	4,380	29,302
March	5,064	20,673	135	4,141	30,013
April	5,125	20,414	84	2,523	28,146
May	5,025	19,914	140	4,557	29,636
June	5,355	20,840	148	4,107	30,450
July	5,388	20,992	147	4,267	30,794
September	5,421	21,145	146	4,426	31,138
October	5,318	20,508	148	5,420	31,394
November	5,437	21,057	172	4,936	31,602
December	5,440	21,134	137	4,732	31,443

	1943	1944	1945
Number of dinners supplied on payment	4,815,072	4,960,312	5,120,560
Numbers of dinners supplied free ..	678,977	943,774	1,096,871

The number of children on free meals in December of the following years is also given for comparison :—

1939.	1940.	1941.	1942.	1943.	1944.	1945
636	342	1,061	3,100	4,200	5,064	5,712

MEALS DURING SCHOOL HOLIDAYS

Meals are supplied during all holidays, but as the numbers who indicate their desire to attend are comparatively small, certain kitchens only in suitable centres remain open.

The holiday figures for 1945 are shown below :—

Holiday Period, 1945	DAILY ATTENDANCE					
	Percentage of usual demand		FREE		PAID	
			Numbers	Per Cent. holiday demand	Numbers	Per Cent. holiday demand
Easter	21·0	1·2	1,114	69·6	269	55·0
Whitsuntide	14·6	·9	756	54·0	238	52·4
Midsummer	19·3	1·5	1,069	60·5	376	79·5
Christmas	13·7	·8	819	44·2	230	35·4

PROVISION OF MILK

MILK ON PAYMENT

The high percentage of children participating in the Milk-in-Schools Scheme has been well maintained. Tribute must again be paid to the help given by teachers who work hard to make the scheme effective.

RECOMMENDATIONS FOR MILK ON MEDICAL GROUNDS

As the provision of milk is to be made without payment to all scholars in August 1946, the following particulars are of some interest.

During medical examinations at the schools, the medical officers recommended 153 children for milk. Nutritional analysis of these gave the following classification :—

Normal	33
Slightly sub-normal	120

In addition, 652 children in receipt of milk on medical grounds were re-examined and fell into the following classification :—

Excellent	2
Normal	275
Slightly sub-normal	373
Bad	2

At the clinics 8 children were recommended for milk, and of these all were classified as slightly sub-normal. In most cases the parent attends and advantage is taken of this consultation for a discussion of all the factors bearing on the child's condition.

The medical officers recommended 23 children for removal from the free milk list on medical grounds. The regular supervision of the children on the free milk list is in accordance with the rules which have now been cancelled.

MILK CONSUMPTION

The following information gives the number of bottles of milk, on payment and free, supplied daily to school children for each month from January to December.

1945	Primary		Secondary		Totals	Nos. of children having 2 bottles daily
	Free	Paid	Free	Paid		
January	5,725	47,562	104	3,479	56,870†	4,740
February	5,419	43,284	91	3,032	51,826*†	4,309
March	6,552	48,381	107	3,053	58,093	4,939
April	6,522	50,843	65‡	1,945‡	59,375	4,836
May	6,356	49,586	104	3,336	59,382	4,872
June	6,585	48,677	109	3,313	58,684	4,890
July	6,177	48,102	103	3,310	57,692c	4,588
September	6,285	49,703	93	3,300	59,481	4,697
October	6,356	49,326	106	3,703	59,491	4,677
November	6,477	49,885	111	3,039	59,512	4,621
December	6,489	49,126	115	3,765	59,495	4,889

† Certain supplies not available for 4 days.

* Measles and mumps epidemic.

‡ King Edward VII School closed all this period.

c Certain supplies not available for 3 days.

The number of children receiving milk on one day during one week in October :—

Date.	Average attendance.	Receiving milk on payment.	Receiving free milk
17th October, 1945	58,890 ..	44,523 ..	6,514

All milk supplied to the schools is pasteurised.

The following extract from Command Paper "Statistics for a day in February, 1945, of Public Elementary and Secondary School Pupils receiving school meals and milk" (Cmd. 6644), is also of sufficient interest to be placed on record.

Sheffield	PUBLIC ELEMENTARY SCHOOLS		SECONDARY SCHOOLS	
	Percentage of those present who received—		Percentage of those present who received—	
	Milk	Dinners	Milk	Dinners
	93·1	46·1	70·1	72·8

Compared with the public elementary schools of the County Boroughs, Sheffield takes second place in this list for milk, and fourth for dinners.

CLEANLINESS

The figures obtained from inspections at the routine examinations, following due notice, are given below, and show some slight improvement in last year's figures. The percentage of infested heads found during the unannounced cleanliness surveys shown on page 42 are both higher than those shown below and the comparable figures for last year.

The figures indicate the serious nature of the problem and the need for the unremitting attention given to this aspect of personal hygiene, which has been fully described in previous sections.

CLEANLINESS OF HEAD

					Clean. %	Nits. %	Lice. %
Boys	..	..	1934	..	98·79	1·15	·044
			1944	..	97·16	2·69	·14
			1945	..	97·03	2·81	·15
Girls	..	..	1934	..	86·52	13·27	·204
			1944	..	82·43	16·69	·87
			1945	..	83·23	15·83	·93

CLEANLINESS OF BODY

					Clean. %	Dirty. %	Body Lice. %
Boys	..	..	1934	..	98·90	1·07	·017
			1944	..	99·52	·44	·03
			1945	..	99·55	·41	·03
Girls	..	..	1934	..	99·12	·87	—
			1944	..	99·61	·33	·05
			1945	..	99·64	·30	·05

BATHS AND CLEANSING

The shower baths at Maltby Street and Whitby Road Schools have served the children from the schools in the neighbourhood. The children at Wincobank School continue to use the shower baths at Wincobank Bath.

CLOTHING AND FOOTGEAR

		SATISFACTORY.			UNSATISFACTORY.		
		1934.	1944.	1945.	1934.	1944.	1945.
Clothing	..	99·66%	99·72%	99·71%	·33%	·27%	·29%
Footgear	..	97·75%	99·50%	99·51%	2·24%	·50%	·49%

The figures show some slight improvement in the standard of clothing and footgear during the past year on the evidence of the inspections at the Routine Examinations. At the special examinations noted on page 42, the figures again show improvement on those of the preceding year. It may be mentioned in this connection that during the year there was inaugurated a scheme for the provision of footgear and clothing by the Authority under the Education Act 1944.

It is fitting, however, that this opportunity should be taken to express appreciation for the splendid help given during the past by the Sheffield Schools Clothing Guild.

SCHOOL HYGIENE

At the close of the routine medical inspection the school medical officers make a rapid examination of the hygienic condition of the schools. Any structural defects are reported and any environmental problems such as the position of desks in relation to lighting are discussed with the teachers.

During the year 1945 the following additions, and alterations and improvements to buildings were effected.

PRIMARY EDUCATION.

Work was completed on classroom huts at Abbeydale, Gleadless and Southey Green County Schools and on a hut and lavatory block at Shirecliffe.

Rehabilitation of the premises after war damage was carried out at Sharrow Lane County School.

SECONDARY EDUCATION.

Work was commenced on the rehabilitation after war damage of a part of the Abbeydale Grammar School.

SPECIAL SCHOOL.

Work was commenced on the conversion to Showers of Cloakrooms at Wadsley Bridge Special School.

SCHOOL MEALS.

Work was commenced on the erection of a prefabricated hut for use as a Meals Kitchen at the Owler Lane County School.

SHIRECLIFFE REMAND HOME FOR BOYS.

Work on the rehabilitation after war damage and the extensions to the building were completed.

INSPECTION CLINICS

The purpose and function of the Inspection Clinics have been fully described in previous reports. Parents and children have fully availed themselves of the facilities afforded to them at these clinics by the medical officers. The accompanying tables record the nature of the consultations during the year.

INSPECTION CLINICS.

Condition	Attercliffe	Pitsmoor	Hillsbro'	Heeley	Central (E)	Central (F)	Hands- worth
Malnutrition	—	3	8	7	—	—	—
Eye—							
Defective Vision	188	159	180	135	86	96	29
Squint	28	67	24	32	13	5	8
Other Conditions	—	—	—	—	—	—	1
Ear—							
Deafness	13	86	27	51	25	16	13
Other Ear Diseases	—	—	—	2	—	2	—
Nose and Throat—							
Chronic Tonsillitis	37	72	6	18	1	7	1
Adenoids	9	14	5	10	6	15	2
Chronic Tonsillitis and Adenoids	10	31	19	4	2	8	8
Other Conditions	1,148	362	243	164	105	92	72
Enlarged Glands (Non-Tuberculous)	55	148	58	36	11	9	6
Defective Speech	3	10	5	3	3	10	—
Teeth	23	15	1	5	2	5	3
Heart and Circulation							
Organic Disease	2	48	3	5	1	6	1
Functional Disease	9	12	5	3	4	—	—
Anæmia	54	24	10	10	3	13	2
Rheumatism	151	70	54	32	24	35	28
Debility	96	106	140	43	81	72	67
Lungs—							
Bronchitis	436	74	90	55	113	88	61
Other Non-Tuberculous Diseases	—	50	34	2	1	—	1
Tuberculosis—							
Pulmonary—							
Definite	1	3	3	1	1	1	—
Suspected	8	—	3	—	3	—	3
Non-Pulmonary—							
Glands	1	—	1	1	4	1	—
Spine	—	—	—	—	—	—	—
Hip	—	—	—	—	—	—	—
Other Bones and Joints	—	—	—	—	—	—	—
Skin	—	—	—	—	—	—	—
Other Forms	—	—	—	—	—	—	—
Nervous System—							
Epilepsy (Major and Minor)	10	5	5	—	4	2	2
Chorea	5	10	7	2	7	1	3
Other Conditions	43	9	16	27	4	12	6
Deformities—							
Rickets	—	1	—	—	—	—	—
Lateral Curvature	—	—	—	—	—	—	—
Infantile Paralysis	1	1	—	—	—	—	—
Other Forms	53	67	17	47	22	26	15
Mental Defects	6	—	5	2	1	7	—
Infectious Diseases	124	141	38	13	5	3	9
Post Diphtheria	3	23	29	25	15	10	1
Diphtheria Contacts	31	29	55	45	32	17	5
Post Scarlet Fever	51	58	55	46	19	40	34
Other Defects and Diseases	413	409	144	387	95	89	32
No appreciable Defect	323	102	81	61	52	50	58
Cases	3,335	2,209	1,371	1,274	745	738	471
Examinations	5,909	3,630	2,762	2,792	1,706	1,631	899

[illegible]

MINOR AILMENTS AND DISEASES OF THE SKIN

SCABIES

The number of cases discovered during the past year—1,546—shows a slight increase over the preceding year, when 1,517 cases were noted. It is to be hoped that this is only a temporary fluctuation and that the decrease following the peak of 1942 will continue.

The Committee's scheme, operating in conjunction with the Public Health Department and offering treatment to all infected members of households, continues to work satisfactorily. Most of the children were treated at the Cleansing Station and later examined by the medical officers before admission to school. 91 cases were under treatment at the end of the year.

RINGWORM OF THE SCALP

There is a further welcome decrease in the number of cases discovered during the year, namely 14, comparing with 27 found in 1944. Dr. R. Hallam treated 11 cases with x -rays in accordance with the Committee's arrangements. There were two cases under treatment at the end of the year.

DISEASES OF THE SKIN

The continued increase in the number of children found with some disease of the skin has been halted during the past year. The total has dropped from 4,656 cases in 1944 to 4,422 in 1945. This does not include cases of impetigo, the numbers being very much the same for the past several years, with a slight decrease in 1945.

MINOR AILMENT CLINICS.

Condition	Atter-cliffe	Pitsmoor	Hills-borough	Heeley	Central (E)	Central (F)	Hands-worth	Wood-house	Shire-green	Manor	Wise-wood	Southey Green	Wybourn	Special Cases	Total
Eye—															
Blepharitis ..	53	67	68	26	18	15	12	8	33	78	19	8	20	2	427
Conjunctivitis ..	110	116	34	69	49	44	19	1	110	68	52	8	33	16	729
Inflammation of Cornea ..	3	—	1	—	—	—	—	—	—	—	—	—	1	—	5
Other conditions ..	124	118	63	77	41	25	19	—	115	104	48	11	37	17	799
Ear—															
Discharging Ears ..	190	138	91	65	59	15	23	13	88	98	26	18	14	37	875
Deafness ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Other Diseases ..	273	118	82	121	50	76	37	9	148	100	26	11	48	46	1,145
Skin—															
Ringworm—Head ..	1	1	—	1	—	2	1	—	3	5	—	—	—	—	14
Body ..	19	14	6	6	4	2	3	—	14	8	6	—	4	6	92
Scabies ..	130	218	190	131	128	54	23	23	182	191	48	81	98	49	1,546
Impetigo ..	474	375	121	33	16	29	1	36	138	227	54	33	27	12	1,576
Sore Head ..	32	129	87	28	60	16	18	11	32	125	1	12	17	13	581
Other Skin Diseases ..	508	829	437	442	243	187	140	71	397	608	145	76	214	125	4,422
Miscellaneous—															
(e.g., Minor Injuries, Bruises, Sores, Chil-blains, etc.) ..	2,352	562	686	1,234	1,021	378	416	314	1,975	2,619	448	196	531	769	13,501
No appreciable defect ..	78	45	16	67	38	9	10	8	41	102	1	15	21	6	457
Cases ..	4,347	2,730	1,882	2,300	1,727	852	722	494	3,276	4,333	874	469	1,065	1,098	26,169
Examinations ..	6,530	4,215	2,892	4,233	3,292	2,198	1,210	650	4,961	5,433	1,394	698	5,375	1,207	44,288

EYE DEFECTS

The number of children found to have defective vision at the routine examinations is set out in the table below :—

<i>Infants or Entrants.</i>				No. examined.		Normal vision.		Defective vision.
Boys	..	..	..	3,013	..	96·01%	..	3·98%
Girls	..	..	..	2,764	..	95·26%	..	4·73%
<i>Seniors or Leavers.</i>								
Boys	..	..	..	2,490	..	90·00%	..	10·00%
Girls	..	..	..	2,151	..	88·33%	..	11·63%
<i>Others.</i>								
Boys	..	..	..	503	..	94·23%	..	5·76%
Girls	..	..	..	445	..	88·76%	..	11·23%

In addition, the school nursing sisters test the visual acuity in certain other age groups. They referred 305 children to the medical officers at the clinics and of these 234 were found to require examination by the ophthalmic surgeon, and 71 were kept under observation.

OPHTHALMIC TREATMENT.

The Ophthalmic Clinic continues to be held on eight sessions each week during the school term. The total number of cases dealt with in 1945 was 4,839. Of these, 1,429 were new cases and the total number of examinations was 9,159. The figures relating to the provision of spectacles are given below :—

Spectacles—

Number of pairs prescribed in the school clinics	1,699
„ obtained through the school clinics and passed by the ophthalmic surgeon	1,779
Total number obtained under the Committee's arrangements—	
free of charge	1,196
at a reduced rate	103
on condition of repayment	9

Since April, 1945, spectacles of standard frames—steel or shell covered—have been supplied free of charge, in accordance with Circular 29 of the Ministry of Education.

ORTHOPTIC TREATMENT

A full description of the work in this department in the training of the squinting child has been given in previous reports.

The relevant figures for the orthoptic department for 1945 are given below :—

Total number of attendances	2,998
Number of patients carried forward from 1944	198
* „ new patients referred for treatment	250
„ „ taken on for treatment	202
„ patients attending twice weekly for instrumental treatment	48
patients under monthly supervision—	
1. Number with occlusion of eye	129
2. „ on waiting list	47
3. „ too young for systematic treatment	22
	198
Number of patients discharged—	
1. Cured	27
2. Cosmetic cures	17
3. Improved	30
4. Unsuitable after trial	34
	108

The unsuitable cases were discharged for the following reasons :

1. Lack of co-operation.
2. Intractable amblyopia (blunted vision).
3. Abnormal retinal correspondence.
4. *Other unsuitable conditions.

Number of patients ceasing to attend 18

* 36 of these cases were orthophoric (no squint).

EAR, NOSE AND THROAT DEFECTS

Of the children examined at the routine examinations 2,119 were found to have enlarged tonsils, 240 slight and 20 markedly adenoidal growth.

The recommendations for these conditions are shown below :—

				Referred for treatment.		For observation.
Enlarged tonsils	..	..	..	211	..	187
Adenoids	..	..	..	17	..	13
Tonsils and adenoids	..	..	..	71	..	48

The percentage of children referred for treatment of unhealthy tonsils and adenoids was 3.4 (3.5 in 1944), in accordance with the modern conservative outlook.

The Committee does not make any direct provision for these conditions and children are referred to the appropriate specialist at one of the hospitals. A limited number are examined by Mr. Cobb, the aural surgeon, at the Ear, Nose and Throat Clinic.

The number of operations for the year for tonsils and adenoids is 432 compared with 434 in 1944.

In addition, 137 were found to be mouth breathers and special treatment was advised where indicated.

EAR, NOSE AND THROAT CLINIC

Mr. Cobb holds a weekly session for the examination of ear, nose and throat defects. The total number of patients seen during the year was 662 and of these 580 were new cases. These children made 743 attendances at this clinic.

The following table gives an analysis of the reasons for attendance :—

Deafness	..	..	..	..	..	..	..	62
Discharging ears	..	..	..	..	..	..	..	37
Otitis media	..	..	..	..	..	..	..	9
Tonsils and adenoids	..	..	..	..	..	..	..	458
Tonsils	..	..	..	..	..	..	..	8
Adenoids	..	..	..	..	..	..	..	39
Aural Polypus	..	..	..	..	..	..	..	2
Rhinitis	..	..	..	..	..	..	..	3
Deflected septum	..	..	..	..	..	..	..	8
Cleft Palate	..	..	..	..	..	..	..	1
Defective speech	..	..	..	..	..	..	..	2
Other conditions	..	..	..	..	..	..	..	22
No appreciable defect	..	..	..	..	..	..	..	11

AUDIOMETRIC TESTING

The number of children tested by the 4-AE gramophone audiometer and the results obtained were as follows :—

Number tested					Deaf—1st test and re-tested		Deaf— 2nd test
3,874	..	..	..	..	249	..	92

All children tested who are found to have more than 9 units loss on the first test are re-tested to eliminate such factors as novelty, lapse of concentration and nervousness.

Of the children tested the following analysis is made :—

Group A. (3-6 decibels)	..	..	..	..	..	3,469 Normal.
„ B. (9-18 „ )	..	..	..	..	..	402 Slightly deaf.
„ C. (21-30 „ )	..	..	..	..	..	3 Partially deaf.
						<u>3,874</u>

A further analysis is made according to the number of ears tested :—

Group A	..	..	..	..	..	..	..	6,183 Normal ears.
„ B.	..	..	..	..	..	..	..	1,527 Slightly deaf ears.
„ C.	..	..	..	..	..	..	..	38 Partially deaf ears.
								<u>7,748</u>

Of the children with defective hearing in both ears, the following analysis is made :—

Group B.	..	..	..	..	..	..	..	29 Children.
„ C.	..	..	..	..	..	..	..	3 „
								<u>32</u>

Special letters were sent to 83 parents, indicating that the test showed the child to have defective hearing. Of these, 8 were already attending the clinic and 1 was under treatment at the Children's Hospital. The parents are advised to consult either their own doctor without delay or the medical officers at the branch clinics. Further examination, if required, is made by Mr. Cobb, at the Ear, Nose and Throat Clinic.

The conditions found in those examined were as follows :—

Cerumen	..	..	..	..	..	..	21
Nasal catarrh	..	..	..	..	..	..	2
Conduction deafness	..	..	..	..	..	..	1
Otorrhoea	..	..	..	..	..	..	7
Enlarged tonsils	..	..	..	..	..	..	2
Eustachian catarrh	..	..	..	..	..	..	11
Perforated tympanum	..	..	..	..	..	..	2
Pharyngitis	..	..	..	..	..	..	1
Otitis media	..	..	..	..	..	..	1
Adenoids	..	..	..	..	..	..	2
For further investigation	..	..	..	..	..	..	5
Nil abnormal discovered	..	..	..	..	..	..	1

The results of treatment are shown below.

BEFORE TREATMENT.					AFTER TREATMENT.				
A Group	..	..	..	1	A Group	..	..	..	19
B „	..	..	..	23	B „	..	..	..	8
C „	..	..	..	6	C „	..	..	..	3
				<u>30</u>					<u>30</u>

SPEECH THERAPY

In view of the number of children awaiting treatment, the Committee sanctioned the appointment of an additional Speech Therapist. Owing to the dearth of Speech Therapists, however, the appointment has not yet been made.

At the end of 1945 there were 45 children awaiting interview at the clinic. Treatment continues to be given at the Newbould Lane Centre.

An analysis of the work carried out during 1945 is shown below:—

A. Number of cases closed during 1945	..	..	..	..	..	103
B. Number of cases carried forward into 1946	..	..	..	..	..	105
TOTAL						<u>208</u>

A. CLOSED DURING 1945.

STAMMERERS.

1. Closed as speech became normal without regular treatment at the Clinic ("Supervision" cases)	..	..	..	..	..	12
2. Closed as speech became normal following regular treatment at the Clinic	..					3
3. Closed following regular treatment as speech became sufficiently free to warrant discharge although some slight hesitancy on rare occasions still occurred—prognosis good	..	..	..	..	..	10
4. Closed following regular treatment when progress had been made, but where that progress had reached a point when further treatment appeared unprofitable	..	..	..	..	..	3
5. Closed at parents' request following regular treatment after some improvement had been made, but before treatment was complete	..	..	..	..	..	3
6. Closed as parents did not keep preliminary appointments, or because after preliminary appointments parents did not desire treatment	..	..	..	..	..	5
7. Closed following investigation as treatment was not likely to be profitable	..					4
						<u>40</u>

SPEECH DEFECTIVES.

1. Closed as speech improved without regular treatment at the Clinic ("Supervision" cases)	..	..	..	..	..	14
2. Closed following regular treatment when speech became normal	..	..				11
3. Closed prematurely for various reasons following regular treatment after speech had greatly improved—prognosis good in all cases	..	..	..	..	..	5
4. Closed following regular treatment after some progress had been made where parents for various reasons did not wish for further treatment	..	..				7
5. Closed following regular treatment after speech had improved to the extent to which physical disability would allow	..	..	..	..	..	2
6. Closed following "Supervision" as speech had improved to the extent to which general condition would allow	..	..	..	..	..	1
7. Closed after complete investigation had been made as other treatment or educational training was found to be required	..	..	..	..	..	8
8. Referred for "opinion only" and therefore closed following investigation	..					1
9. Closed as parents did not keep initial appointments, or following initial appointments were unwilling for treatment	..	..	..	..	..	9
						<u>58</u>

SPEECH DEFECTIVES PLUS STAMMER.

1. Closed as ill-health prevented continued attendance	..	..	..	..	..	1
2. Closed at parent's request after some improvement had been made, but before treatment was complete	..	..	..	..	..	1
3. Closed after complete investigation had been made as other treatment or educational training was required	..	..	..	..	..	3
						<u>5</u>

103

B. CARRIED FORWARD INTO 1946.

REGULAR TREATMENT CONTINUING.

1. Speech defectives	35
2. Stammerers	38
3. Speech defectives plus stammer	2
	<hr/> 75

SUPERVISION.

1. Speech defectives	
2. Stammerers	6
	<hr/> 15

INVESTIGATION COMMENCED	15
	<hr/> 105

INTERVIEWS DURING 1945.

Treatment interviews with children	2,668
Supervision interviews with children	40
Diagnostic interviews	98
Interviews with parents	717
Other interviews	59
" Recall " interviews (some months following discharge)	7

VISITS MADE DURING 1945.

Visits to schools	40
Visits to homes	11
Visit to Dental Hospital	1

CONSULTATIVE EXAMINATIONS.

Consultation with the Child Guidance Clinic	37
„ „ Dental Hospital	5
„ „ Ear, Nose and Throat Specialist	14
„ „ Neurologist	4
Number of pure-tone Audiometer Tests	3

Miss Pollitt, Senior Speech Therapist, reports as follows :—

“During the year 1945, 103 cases have been closed compared with 115 in 1944, while 105 “ current ” cases have been carried forward into the New year compared with 106 in 1944..

The decrease in numbers had been anticipated as the appointment of a second Therapist during 1944 made a big rise in the immediate intake of cases in that year and that increase has been in the process of assimilation during the present year without the opportunity for a similar large intake of new cases. The fact that the decrease in number is so slight has been the result of extremely hard work on the part of the staff of the Speech Therapy Clinic.

It has been found that certain cases improve without actual treatment. In the majority of these cases the therapists' insight and knowledge is used to judge whether the case concerned can be “left to himself” once the parent and teachers have been helped to appreciate the problem concerned. When the Therapist does come to that conclusion, the case is not closed, but is put on supervision, which implies a periodic visit to the Clinic. Closure only comes when the Therapist's prognosis has proved to be correct. As the

Therapist's experience grows her ability to detect "supervision" cases increases, with the result that by degrees only the severe cases are receiving regular treatment, and these cases being severe, are proving to require a lengthy period of treatment. Bearing this in mind, it will be appreciated that the figures for any one year will vary according to how many cases prove to be "treatment" cases and how many prove to be "supervision" cases as more "supervision" cases can be dealt with than "treatment" cases in the same amount of "Therapist's time." A larger number of "treatment" cases are being carried forward into 1946 than were carried forward into 1945, with a corresponding decrease in the numbers being carried forward in the "supervision" and "investigation commenced" categories, compared with those categories carried forward in 1944. If new cases seen during 1946 continue to "weigh" on the side of "treatment"; then the number of cases seen during the year 1946 is likely to decrease.

The figures given in the tables above only assess the extent to which "treatment" or "supervision" has proved to be a curative measure. They do not indicate the value of the work of the Clinic as a whole. A considerable amount of time and energy is expended on behalf of patients who may never receive "treatment" nor come under the heading of "supervision." Among cases which have been closed because parents did not keep initial appointments, or because, following initial appointments, they were unwilling for treatment, are those upon whose behalf the Therapist has spent a considerable amount of time with the teachers concerned. Owing to the parent's attitude it may not have been possible to give direct treatment to the child, but the interviews between Therapist and Teacher do leave the Teacher in a better position to understand the child's case, even though there may be little likelihood that the Teacher can help to relieve the defect.

The categorical statements attached to the figures in regard to the extent to which treatment has been beneficial should also be viewed in the light of such facts as the following. In some cases the parents consider that their child is "cured" as soon as the child has the power to articulate clearly, even though the child may be reluctant to express himself and make contact with others through speech. The Clinic does not only consider the "speech" of a child but the child "as a whole" and as long as a child is not using speech as a means through which he can make easy spontaneous contact with others, it is not felt that he can be looked upon as "cured," even though his speech, when he does use it, is intelligible. Among the cases, classified as "Speech Defectives 4" in the tables, are cases where the parents themselves consider improvement is such that further treatment is unnecessary, although Teacher and Therapist may feel that further treatment would be beneficial. In these cases, the Clinic does not attempt to countermand the parents opinion,

as it is felt that to do so would be harmful and would in itself undermine that part of the work of the Clinic which aims at helping the parents to take the responsibility for the progress of the child.

The Clinic does valuable work in detecting those cases which are referred to in the figures as closed following investigation because it has been found that other treatment or educational training is necessary. There are cases, of whom it is said by the parent and the teacher that "this, that and the other difficulty would soon improve if only speech could be made normal." Unfortunately such an opinion is not always correct. In some of these cases, treatment, as such, is not the Therapist's main concern; the need for "this, that and the other" to be recognised and suitably dealt with may be of far greater importance. Such is the case of the child who proves to have a marked degree of deafness and such is the case of the stammerer of very low intelligence who is being expected by the parent and sometimes by the teacher to "keep up" in school and to behave like other children in the family or group. In such cases understanding by the parent and teacher of the problem involved, and training in the school most suited to the child's needs is the first consideration.

The value of "treatment" and "supervision" is not being stressed in this written report as it is felt that in these respects the figures speak for themselves. It seems only necessary to mention the value of that side of the work of the Clinic which, if judged by the figures alone, might appear to be unprofitable.

The Clinic is indebted to the specialists who help in diagnosis and without whose help the Therapist would be "working in the dark." The number of cases on the tables headed "Consultative Examinations" proves how very dependent the Therapist is, in certain cases, on help from the various specialists. It is largely through having contact with the specialists and, by so doing, getting to know so much more about the innumerable facts which affect speech, that the Therapist is able to feel that she can look upon each case as an individual and give treatment accordingly."

DENTAL TREATMENT

There was a slight decrease in the acceptance rate for treatment during the year—61%, compared with 64% in 1944. It may be mentioned that there were less children inspected—40,142, compared with 59,141 in 1944.

This is due to the serious shortage of dental staff, as mentioned earlier in this report, and the Inter-Departmental Committee on Dentistry has recently indicated that there is likely to be a marked shortage in the country for some years to come.

However, the standard of treatment continues to be high, and the number of permanent fillings for every 100 children was 42.

The relevant figures for the work carried out during the year are given in Table iv, page 61.

The continued help and co-operation of the Sheffield Dental Hospital, both in the arrangements for orthodontic work and with the assistance in special types of cases, is gratefully acknowledged. The arrangements made with the hospital last year for dental x-rays has worked well. 13 cases were referred for this purpose by the School Dental Surgeons.

ORTHOPÆDIC AND POSTURAL DEFECTS

Mr. Holdsworth, the Orthopædic Surgeon, has held his clinics regularly throughout the year. A summary and analysis of the cases seen by the Orthopædic Surgeon is given below :—

Conditions	Seen at the Clinic	At Special Schools		Total
		Arbour- thorne N'th	Nether Green	
Infantile paralysis	14	4	4	22
Spastic paralysis	17	3	5	25
Congenital deformities—				
(a) Talipes	7	—	—	7
(b) Dislocation of hip	8	1	—	9
Scoliosis	9	—	—	9
Kyphosis	8	—	—	8
Flat feet	203	—	—	203
Amputation	—	1	1	2
Pes valgus	5	—	—	5
Genu valgum	34	—	—	34
Torticollis	11	—	—	11
Pes cavus	15	—	—	15
Congenital high scapula	1	—	—	1
Hallux rigidus	8	—	—	8
Claw foot	5	—	1	6
Talipes	3	1	—	4
Genu varum	5	—	—	5
Osteomyelitis	1	—	1	2
Hallux valgus	3	—	—	3
Hammer toe	8	—	—	8
Others	45	2	1	48
No appreciable defect	46	—	—	46
Cases	456	12	13	481
Attendances	668	13	15	696

Number of new cases	266
Number of old cases	215
Number of cases discharged	146
Number of cases transferred to hospital	6
Number of operations advised	1
Number of operations performed	1
Number of new appliances ordered	83
Number of appliances in need of repair	6

300 surgical appliances were supplied free of cost in accordance with the terms of the Education Act, 1944, and indicated more specifically in Circular 29 of the Ministry of Education.

NON-TUBERCULOSIS CASES SEEN BY MR. LEE PATTISON

Number of Sheffield school children treated at King Edward VII Hospital during 1945 ..	1
Number of Sheffield school children seen at the Orthopædic Clinics of the Child Welfare Centre during 1945	87

REMEDIAL EXERCISES AND PHYSIO-THERAPY

Treatment is given at the Edgar Allen Institute and one child attended under the Committee's agreement. In addition, 68 children were referred to the Institute through various agencies. Dr. Abercrombie, the Medical Director, has kindly provided the following complete report :—

Condition	Number treated	Result of Treatment		
		Free from Symptom	Improved	Not Improved
Debility	19	—	19	—
Rheumatism	5	3	2	—
Pes planus	14	3	11	—
Pes cavus	3	1	2	—
Hallux rigidus	1	—	1	—
Genu valgum	5	1	4	—
Spastic valgus	1	—	1	—
Scoliosis	2	—	1	1
Spastic diplegia.. .. .	1	—	—	1
Facial paralysis.. .. .	1	1	—	—
T.B. Adenitis	2	—	2	—
Fracture	2	—	2	—
Minor injuries	2	—	2	—
Fibrositis	5	3	2	—
Torticollis	2	—	1	1
Asthma	3	—	3	—
Congenital deformity	1	—	—	1
TOTAL	69	12	53	4

TUBERCULOSIS OF BONES AND JOINTS

Number of Sheffield school children treated at King Edward VII Hospital during 1945 ..	48
Number of Sheffield school children seen at the Tuberculosis Dispensary during 1945 ..	1,721

HEART DISEASES AND RHEUMATISM

A full description of the nature of the work undertaken by the Physician at this clinic has been given previously. The medical officers continue to welcome the opportunity of this specialist service. Moreover, the active association with the Children's Hospital enables any further laboratory investigation and x-ray examination to be made.

At this clinic also, suitable children are nominated for Ash House School and here all the children are effectively " followed-up " on discharge from the school.

The local increase in all forms of rheumatism noted previously unfortunately continues but it is at least satisfactory to note that the Committee can offer the requisite treatment and supervision.

At the same time, the Authority is heartened to learn that a special committee of the Medical Research Council has in hand at least one type of investigation into acute rheumatism in children.

A summary and analysis of the cases seen by the specialist follows :—

Condition	School children		
	New Cases	Old Cases	Attendances
1. RHEUMATIC PAINS OR ARTHRITIS—			
(a) with heart affection	33	58	232
(b) without heart affection	17	33	112
2. RHEUMATIC CHOREA—			
(a) with heart affection	6	13	58
(b) without heart affection	2	8	32
3. RHEUMATIC CARDITIS WITHOUT (1) OR (2) ABOVE	70	93	385
4. CONGENITAL HEART DISEASE	16	55	110
5. FUNCTIONAL HEART DISORDER	11	22	30
6. NO RHEUMATISM OR HEART DISEASE OR DISORDER	46	36	94
7. RECENT RHEUMATISM, NO LONGER ACTIVE, NO CARDITIS.	29	4	52
Totals	230	322	1,105

TUBERCULOSIS

Co-ordination between the School Health Service and the Clinical Tuberculosis Officer, Dr. Midgley Turner, continues smoothly and efficiently. Dr. Midgley Turner's report on the work of the Dispensary in relation to school children follows :—

“The work of the Tuberculosis Dispensary amongst tuberculous school children and suspects continues to be carried on in close co-operation with the School Health Department. The sessions on Wednesday mornings and afternoons and Saturday mornings are mainly devoted to the examination of school children at the Tuberculosis Dispensary.

The names of all children who are known to have been in contact with infectious cases of tuberculosis in their homes, are supplied to the School Medical Officer. By this means the School Medical Officer is able to keep these children under specially close supervision. In all, 104 of these contacts were reported to the School Medical Officer during 1945.

The examination of “contacts” has been continued and the regular treatment and supervision of tuberculous children has been carried out. Of the 269 “contacts” of school age examined, 151 were retained on treatment and supervision at the Tuberculosis Dispensary.

During the year 1945, 2629 attendances (exclusive of new cases) were made by school children, 1596 by notified cases, and 1,033 by observation cases. These figures are lower than those for last year, and this is probably due to

the fact that many parents find it difficult to bring their children to the Dispensary owing to present conditions. The proportion of absentees, therefore, tends to be rather higher than in normal times.

NEW CASES. 6 notified cases of tuberculosis of the lung were examined, 269 "contacts" and 384 suspicious cases. (Of the latter, 102 were sent up by the School Medical Officer).

X-ray examinations were made in the cases of 592 school children.

During the year 38 notified and 115 suspicious cases were admitted into Sanatorium for observation and treatment.

The number of Notifications of Tuberculosis in school children received was :—

PULMONARY—Males ..	42	NON-PULMONARY—Males ..	18
Females ..	39	Females ..	16

Tubercle Bacilli were found in the sputum of three children.

Forty-six places at the Whiteley Wood Open Air School were reserved for children selected by the Tuberculosis Medical Officer. Should he not require the whole of the 46 places, there is an arrangement whereby the vacant places are filled by the School Medical Officer. The children selected had signs of infection of the chest glands without marked invasion of the lung tissue, and were, therefore in a non-infectious condition.

In addition, twenty-six places were reserved at the Springvale House Open Air School for children selected by the Tuberculosis Medical Officer."

CHILD GUIDANCE CLINIC.

There has been little change in the arrangements and type of work done during the year under review. As will be seen in the appended figures, the West Riding, Doncaster and Rotherham Authorities continued to use the clinic services to about the same extent as previously and the branch clinics set up for consultative work in Doncaster and Rotherham have continued as before, such children as have needed treatment travelling through to Sheffield.

Two hundred and forty-eight children were referred during the 12 months, 165 boys and 83 girls. This proportion of approximately 2 boys to 1 girl is the same which has been observed in preceding years. The total number referred is much less than the 1944 figure (349) which was exceptional and is about the same as the average figure for the three years prior to 1944. It is interesting to speculate on the association between the effect

of war conditions and the number of children referred, both as regards absence of fathers and absence of teachers. The end of the war and the impending return of menfolk to homes and schools may have some bearing on this position. The decrease in those referred is, however, found in the numbers sent in by teachers and school medical officers. There may be in the minds of those who would refer, the long list of children waiting for treatment. It can hardly be encouraging to take steps to refer any but the worst cases when it is known that a year is likely to elapse before treatment is available.

There have been 253 cases closed during the year which is above the average for previous years. This is not unsatisfactory in view of the fact that the assistant psychologist has worked only on a half-time basis throughout the year, and the clinic was without one psychiatric social worker for the first 9 months of the year and without a psychiatrist for the last 2 months, Dr. Cobb resigning in October. It has to be recorded that Miss Nicholson, who has been psychiatric social worker at the clinic since August 1943, also left for another post at the end of the year.

One half of the children referred were between 8 and 12 years when first brought to the notice of the clinic, one quarter being younger and one quarter older than this. As regards cases closed during the year, the intelligence of one half of the children could be described as dull, one quarter being very dull indeed, but on the other hand the rest of the children ranged from average up to extremely bright. Apart from the number of children aged 13 and over there have been no significant changes in age range and intelligence during the last five years. There were, however, more children of 13 years and over referred in 1945, these being 18 per cent. of the total over and against 7 per cent. in 1944.

During the year the usual educational work of a prophylactic nature has been undertaken and as close a contact as possible has been kept with the schools, but there has inevitably been some lessening of this side of the work owing to the position with regard to staff. There has been a cordial relationship between those referring children and the clinic, and teachers especially, during a most difficult year have co-operated helpfully in getting children to the clinic and in supporting the clinic's work with the children.

	Sheffield	West Riding	Doncaster	Rotherham	Total
NUMBER OF CASES REGISTERED DURING 1945.					
Girls	56	15	6	6	83
Boys	120	23	13	9	165
Total	176	38	19	15	248
ANALYSIS OF REGISTERED CASES.					
Cases closed 1st January, 1945 to 31st December, 1945	179	36	21	17	253
Cases open on 31st December, 1945	120	20	9	8	157
Cases on waiting list 31st December, 1945	5	—	1	—	6
Total	304	56	31	25	416
REASONS FOR CLOSING CASES, DURING 1945.					
Did not attend at all	9	6	3	—	18
Patients unco-operative	—	—	—	—	—
Parents unco-operative	5	—	1	—	6
Further attendance impossible	6	3	1	—	10
Transferred to other treatment	2	—	—	—	2
Consultation only	126	21	9	11	167
Treatment completed	21	2	3	—	26
After supervision	10	4	4	6	24
Total	179	36	21	17	253
ANALYSIS OF CASES OPEN 31ST DECEMBER, 1945.					
Under treatment	22	4	2	1	29
„ supervision	19	1	—	—	20
„ investigation	17	2	1	1	21
Awaiting treatment (investigation complete)	62	13	6	6	87
Total	120	20	9	8	157

REASONS FOR REFERENCE OF ALL CASES.

Authority	Nervous disorders	Habit disorders	Behaviour disorders	Intellectual difficulties	Other disorders	Total
Sheffield	20	9	55	90	2	176
West Riding	7	6	21	4	—	38
Doncaster	2	2	12	3	—	19
Rotherham	4	1	5	5	—	15
Total	33	18	93	102	2	248

SOURCE OF REFERENCE.

Authority	School Medical Officer	Head Teacher	Speech Therapist	Parent	Probation Officers	Private Doctor	Hospital	Others	Total
Sheffield	15	76	32	27	4	7	5	10	176
West Riding	8	12	2	8	2	1	—	5	38
Doncaster	2	11	—	—	—	2	1	3	19
Rotherham	7	7	—	1	—	—	—	—	15
Total	32	106	34	36	6	10	6	18	248

AGE RANGE ON REFERENCE.

Age	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	16+	Total
Number of children	1	1	—	3	10	23	29	33	36	25	24	18	25	10	5	4	1	248

INTELLIGENCE QUOTIENT RANGE OF ALL CASES CLOSED DURING THE YEAR.

70 and below.	71 to 80	81 to 90	91 to 100	101 to 110	111 to 120	121 to 130	Over 130	Not tested.	Total
45	54	57	31	20	15	4	3	24	253

RETURN OF INTERVIEWS AT THE CLINIC.

Authority					PSYCHIATRIST DEPARTMENT	PSYCHOLOGICAL DEPARTMENT	SOCIAL WORKERS' DEPARTMENT	TOTAL
Sheffield	..	..	..	..	200	1,089	687	1,976
West Riding	..	..	..	..	37	101	105	243
Doncaster	..	..	..	..	54	82	102	238
Rotherham	..	..	..	..	36	39	69	144
Total	..	..	..	..	327	1,311	963	2,601

RETURN OF EVACUEES.

The curtain can now be rung down happily on the scenes of evacuation. The children from the south of England who had been evacuated to Sheffield in 1944 during the flying bomb attacks returned to their own homes in June. The first party left on 6th June and the second on 28th June.

It is with a thankful heart that this section is penned for the last time, as memories crowd in, ranging from the memorable exodus of the Sheffield mothers and children in 1939 to the arrival of the southern parties in 1944, showing obvious signs of stress and strain. Heart strings were torn then, for many of the children on arrival were "exhausted, lonely and frightened."

Much can be said of the hospitality accorded to the evacuees, and the affectionate leave-takings on the station were evidence of the happy relationships which existed between the foster-mothers and the children.

In accordance with the usual practice, 319 children were examined prior to departure, and information relating to any defects found was forwarded to the appropriate authority.

The few children who were found to have infested heads were cleansed before departure.

WORK OF SCHOOL NURSING STAFF.

The work of the School Nursing Sisters and Nursing Assistants has been fully described in previous reports.

Under the 1945 School Health Service Regulations, nurses appointed after April 1st by the Education Authority for the purpose of the School Health Service must possess qualifications prescribed for a Health Visitor.

SUMMARY OF WORK OF THE SCHOOL NURSING SISTERS
AND NURSING ASSISTANTS.

IN THE SCHOOLS—

Attendance daily with the Medical Officers at Routine Inspection.

Examination of children under cleanliness scheme—Boys	..	..	..	64,971
Girls	..	..	..	80,039
				145,010
„ „ for “ following up ”	..	..	..	5,251
„ „ for investigation of outbreak of Infectious Diseases	..			34,770
„ „ for other purposes	...	..	..	36,711
Number of children weighed and measured	..	..	..	33,126
Number of visions tested	..	..	..	14,476
Number referred to clinics	..	..	..	5,777
Number of visits to schools	..	..	..	12,973

IN THE CLINICS—

INSPECTION CLINIC—Attendances with the Medical Officers.

TREATMENT CLINIC—

	EYE TREATMENT		EAR TREATMENT		DRESSINGS	
	Cases	Attend- ances	Cases	Attend- ances	Cases	Attend- ances
Attercliffe	146	750	465	2,595	2,266	7,782
Pitsmoor	154	820	250	2,039	1,280	7,445
Hillsborough	159	1,033	239	2,301	1,084	7,163
Heeley	160	1,099	188	2,361	1,154	8,037
Central	290	1,281	297	3,621	1,446	9,293
Handsworth	41	146	60	360	318	1,277
Woodhouse	23	107	32	217	408	2,035
Shiregreen	243	1,098	416	2,775	1,956	7,446
Manor	248	869	178	1,949	2,499	10,892
Wisewood	134	703	99	643	763	3,135
Wybourn	93	855	80	1,149	923	6,391
Southey Green	82	462	88	566	1,089	6,563
Special Schools	228	2,718	233	5,970	2,417	34,855
	2,001	11,941	2,625	26,546	17,603	112,314

485 heads (120 boys, 365 girls) have been cleansed at the Clinics by the Nursing Assistants.

IN THE HOMES—

Visits for “ following up ”	..	..	..	..	..	..	1,733
„ neglect, uncleanness, etc.	..	..	..	..	..	..	590
„ various purposes	..	..	..	..	..	..	2,029

CLEANLINESS SURVEY—

Total examinations—Boys	..	..	..	64,971		
Girls	..	..	..	80,039		
					145,010	
Nits found	Boys	..	..	6,265	(9·64%)	
	Girls	..	..	24,868	(32·18%)	
					31,133	(25·70%)
Verminous	Boys	..	..	1,016	(1·56%)	
	Girls	..	..	2,128	(2·65%)	
					3,144	(2·16%)
Dirty	Boys	..	..	1,335	(2·05%)	
	Girls	..	..	601	(0·75%)	
					1,936	(1·33%)
Verminous clothing found	..	..	..	—	—
Number of individual children found to be not clean during the year	..	..	..	..	..	8,042
Bad clothing	Boys	..	..	275	(0·42%)	
	Girls	..	..	145	(0·18%)	
					420	(0·28%)
Bad footwear	Boys	..	..	620	(0·95%)	
	Girls	..	..	352	(0·43%)	
					972	(0·66%)

In accordance with the local practice, 3,205 children who were found to be suffering from various defects during general survey were referred by the school nursing sisters to the clinics, and 2,572 children were also referred to the clinics by the nursing assistants during cleanliness inspections.

INFECTIOUS DISEASES

The School Health Service works in active co-operation with the Public Health Service over the control of infectious diseases in the schools. The general arrangements and methods employed in maintaining close supervision and in investigation have been fully described in previous reports. The incidence of infectious disease during the four quarters of the year as reported through the schools is shown below. These numbers do not give complete cases but are sufficiently indicative of the trend of infection.

	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Total	
					1945	1944
Measles	3,334	560	47	16	3,957	1,375
German measles	127	133	39	30	329	1,706
Whooping cough	215	90	85	128	518	725
Chicken pox	459	273	166	332	1,230	3,696
Mumps	3,438	820	115	52	4,425	1,215
Scarlet fever	226	171	121	190	708	963
Diphtheria	60	61	35	61	217	300

DIPHTHERIA

The total number of notified cases of diphtheria occurring in the age groups 5—15 was 119, compared with 215 in 1944, 434 in 1943, 708 in 1942, 853 in 1941 and 530 in 1940.

The total number of fatal cases occurring amongst school children was 4 compared with 4 in 1944, 5 in 1943, 18 in 1942, 16 in 1941 and 20 in 1940. None of these children had been immunized.

As a local measure the 216 children discharged from hospital were examined, together with 312 contacts.

The school medical officers notified 30 cases of diphtheria, 27 being throat and 3 nasal. Swabs were taken as indicated through the year and the following table shows the number and the results :—

SWABS TAKEN :—				Positive	Negative	Total
Throat				34	101	135
Nose				2	44	46
Ear				—	5	5
				<u>36</u>	<u>150</u>	<u>186</u>

There were 22 visits to schools where cases of diphtheria had occurred for the purpose of investigation.

IMMUNIZATION AGAINST DIPHTHERIA

The details describing the local drive for immunization have been given in previous reports. The problem of dealing with indifferent parents is tackled by follow-up letters and personal appeals by the head teachers, the medical officers and the school nursing sisters wherever possible. It is difficult, however, to gain access to many of these parents and it is regrettable to note that the children may suffer through their indifference.

From available records it is gratifying to note that 86 per cent. of the children in the city—aged 5 to 15—had been immunized by December, 1945.

During the year the reinforcing or stimulating dose was offered to children aged 5 or 6 who had received their immunization treatment in early infancy. The response has been very satisfactory, 71 per cent. of the parents accepting this offer.

The relevant numbers for the work done in 1945 by the School Health Service are shown below :—

Number of letters sent through schools to parents	8,031
„ parents who desired treatment	3,827
„ „ later refused treatment	225
Acceptance rate	48 per cent.
Number of children who have attended for treatment	5,394
„ „ received complete treatment:—	
Children up to 5 years	657
5 to 15 „	1,925
over 15 „	—
Number received part treatment	365
Total number of attendances	8,279

The figures from the inception of the scheme to the end of April 1946, are given below :—

Number who have received complete treatment during 1941	5,091
„ „ „ „ 1942	19,495
„ „ „ „ 1943	15,478
„ „ „ „ 1944	3,357
„ „ „ „ 1945	2,582
„ „ „ „ 1946	983
(to end of April)	
	<u>46,986</u>
Number of cases where treatment is not yet complete	1,715
Total number of all attendances	127,842

STIMULATING OR REINFORCING DOSES

Total number of letters forwarded to parents since April, 1944	6,175
Total number of acceptances	4,401
Acceptance rate	71 per cent.
Total number treated	4,371
(99 per cent. of the acceptances).	

SCARLET FEVER

The total number of cases of scarlet fever occurring in children between 5—15 years notified to the Medical Officer of Health during 1945 was 664, compared with 1,082 during 1944. The school medical officers notified 14 cases and examined 476 cases following discharge from isolation. There were 11 visits paid to the schools for the purpose of investigation.

MEASLES

There was a marked increase in the number of cases of measles in the first quarter of the year, which reached epidemic proportions. The increase commenced between the end of the last quarter of 1944 and the evidence shows the biennial periodicity of this disease. Dr. Butler¹ has recently analysed the statutory notifications for the past six years, and the evidence adduced markedly illustrates the biennial nature of the recurrences. 107 visits were paid to schools to assist in the supervision and early diagnosis of the cases. The disease, fortunately, was of a mild character.

WHOOPING COUGH

The number of cases occurring during the year was again less than in the preceding year. The school medical officers notified 4 and 2 visits were paid to the schools in this connection.

CHICKEN POX

There was a marked decrease in the number of cases during the year. 5 visits were paid to the schools in this connection.

MUMPS

The number of cases increased considerably in the fourth quarter of 1944, continuing to decrease in the first quarter of 1945, and waned during the following quarters. 86 visits were paid to schools.

SCHOOL CLOSURE

No school or department was closed during the year on account of infectious disease.

¹ *Monthly Bulletin of the Ministry of Health*, April, 1946.

PHYSICAL EDUCATION

Close co-operation exists between the School Health Service and those engaged in physical education. In particular, individual reports are made on children submitted for an opinion as to their suitability for various types of physical activities. During the general medical examination also, this consideration is always borne in mind and head teachers are informed where restrictions are considered necessary.

Mr. Carr, Chief Superintendent of Physical Education, contributes the following necessarily abbreviated report :—

“ 1. *Introduction.*

The year 1945 saw the end of the war and with it a determined desire to return to a peace time basis of activity. There have been difficulties owing to depleted organising staff—one woman organiser who resigned in March, 1945, has not yet been replaced and one male organiser who joined the Royal Air Force in October, 1940, has not yet returned.

The shortage of male teachers has also had its effect, particularly among the older boys. The steady return of men from the Forces, however, towards the end of the year has helped to ease the situation and whilst welcoming the return of men teachers, tribute is due to the women teachers who have given yeoman service during the war years, particularly among the older boys.

2. *Teachers' and Leaders' Courses of Training.*

The Committee, through their Physical Education staff, continue to provide facilities for teachers and others to keep abreast of modern developments.

Refresher Courses were held as follows :—

Recreative Physical Training (men and women).

“ Keep Fit.”

Ballroom Dancing.

Physical Training for teachers of Infant children.

3. *Voluntary Organisations.*

Various teachers' organisations ensure the continuation of the physical welfare of the children in or out of school hours. The arrangement of league fixtures in football, cricket, netball and rounders, as well as of inter-city matches, tournaments and swimming galas is the work of the Sheffield Schools' Athletic and Swimming Associations respectively. The Sheffield

Aesthetic and National Dance Society, the Teachers' Folk Dance Society and the Teachers' Netball Club contribute to the successful prosecution of dancing and netball.

4. *Physical Education in the Schools.*

The many phases of Physical Education are receiving closer attention as the staffing position improves. The character of physical training is changing and is becoming less formal and more enjoyable as apparatus allowing full play of the natural activities is used ; dancing is developing on creative lines ; games are still curtailed for lack of balls and adequate playing field accommodation ; progress in swimming continues. Sheffield schools having won the Life Saving Shield for the second year in succession and for the fourteenth time since the competition was instituted. Individual school sports and swimming galas are being organised in ever increasing numbers, which is a very good sign. The general posture of children, particularly boys, leaves something to be desired and attention is being paid to this defect. Camping is encouraged as a healthy activity and, rightly used, develops self reliance and initiative.

There has been the usual collaboration with the Parks Committee in arranging demonstrations as part of the Holidays-at-Home programme. Sixteen demonstrations of recreative activities were given by individual schools, evening school students and members of the Keep Fit Association.

5. *Playing Fields.*

These are used to capacity and the position is alleviated to some extent by the use of the public parks. Not half of the senior children are accommodated for major games.

6. *Recreative Physical Training for Adolescents and Adults.*

All types of recreative activities are provided for students in Evening Schools and members of Club Institutes and the Keep Fit Association. The Committee also provide instructors for youth organisations when required to do so, but it is becoming increasingly difficult to provide suitable women instructors who have the right qualifications for post school recreative work."

CO-OPERATION OF PARENTS, TEACHERS, EDUCATION WELFARE OFFICERS AND VOLUNTARY BODIES

The value attached to the parent's presence at the routine medical inspection and the importance of consultation between the doctor and the parent whenever possible has been stressed in previous reports.

The following percentage of parents took advantage of attending with the children at the routine examinations :—

Entrants	5 years old	..	..	..	..	..	..	88·26%
Leavers	13	„	..	..	..	..	..	37·30%

Parents also value the consultation offered and accompany the children in increasing numbers at most of the Clinics.

To the teachers and the inspectorate a special debt of gratitude is due. They help in very many ways and give active assistance in ensuring the success of medical, dental and cleanliness inspections, diphtheria immunization treatment, and in the preparation of special reports on individual children.

The education welfare officers give valuable aid in the following-up system and provide the connecting links between the ancillary sections.

Appreciation can be expressed here of the co-operation and help given by general practitioners and medical officers at the various hospitals.

The help which has been given during the year by the National Society for the Prevention of Cruelty to Children, through their energetic and tactful local inspectors, has been much appreciated.

The Cripples' Aid Association, the Voluntary Association for Mental Welfare, and the Council of Social Service have again rendered useful service during the year.

Due acknowledgment and thanks are given to the local Press for their sympathetic and helpful presentation of school health topics.

NURSERY SCHOOLS AND CLASSES

A full account of the medical care and dietary provision for these infants has been given in previous reports.

No further classes were opened during the year, and there remain 2,145 places in 47 classes and 2 schools.

The concession of giving cod liver oil and orange juice to all these children has been continued. In addition, an iron supplement is given to infants selected by the medical officers, suffering or suspected to be suffering from anæmia, with resulting improvement.

The medical officers paid 256 visits to the schools and classes and examined 2,372 for "routine" and 2,207 as "selected" and quarterly examinations, calling for 47 letters and 30 letters respectively, advising the parents of defects found.

RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION

Defect or Disease	Routine Inspection. Number of Defects.		Special Inspection. Number of Defects.	
	Requiring Treatment	Requiring Observation	Requiring Treatment	Requiring Observation
Minor ailments	23	10	21	5
Visual defects	23	12	12	5
Defects of nose and throat	57	52	25	16
Dental defects	2	—	2	—
Other defects	38	107	10	28

RETURN OF DEFECTS TREATED

Defect or Disease	Number of defects treated or under treatment during the year		
	Under the Authority's scheme	Otherwise	Total
Minor ailments	29	3	32
Visual defects	21	4	25
Defects of nose and throat	11	15	26
Dental defects	—	—	—
Other defects	12	5	17

HANDICAPPED CHILDREN.

Reference has been made earlier in the report to the Handicapped Pupils and Health Service Regulations dated July, 1945, made under the Education Act 1944, and in this section it would be as well to state the categories of handicapped pupils requiring special educational treatment as defined in the Regulations.

These are :—

- Blind pupils.
- Partially-sighted pupils.
- Deaf pupils.
- Partially deaf pupils.
- Delicate pupils.
- Diabetic pupils.
- Educational sub-normal pupils.
- Epileptic pupils.
- Maladjusted pupils.
- Physically handicapped pupils.
- Pupils suffering from speech defect.

It will be noted that the Committee, either through their own schools or through residential schools maintained by other Authorities, have dealt with pupils in all categories according to their needs, with one exception. The exception applies to the diabetic pupils, and these pupils, according to available information, are able to obtain the treatment they need while living at home. The Committee have given these children close consideration in past years, and modifications in their care have been duly chronicled in these pages.

In June, the Wadsley Bridge Special School for Educationally Sub-normal Senior Boys was opened. The accommodation at the Hillsboro' Special School was then made available for the educationally sub-normal junior boys who were attending the Highfield Special School. The latter school then became available for junior and senior educationally sub-normal girls only.

The general arrangements for the care and supervision of the handicapped children remain as described in previous years. Certain features, however, call for comment.

It is a pleasure again to record the successful treatment of the children admitted to Ash House. During the year 68 children (33 girls and 35 boys) were admitted.

The following analysis gives the type of rheumatic manifestation shown by these children :—

Rheumatism	..	..	..	..	..	..	..	23
Mitral stenosis	..	..	..	..	..	..	..	4
Chorea	..	..	..	..	..	..	..	2
Rheumatic endocarditis	..	..	..	..	..	..	..	26
Rheumatic carditis	..	..	..	..	..	..	..	5
Mitral disease	..	..	..	..	..	..	..	5
Aortic incompetence	..	..	..	..	..	..	..	1
Chorea and endocarditis	..	..	..	..	..	..	..	2

During the year 68 children were discharged. The average length of treatment was 6·2 months.

After discharge from Ash House the children are followed up at the Rheumatism and Heart Clinic held at the Central Clinic. The further history of these children is shown in brief by the following table :—

Fit for ordinary school	..	..	..	..	..	..	..	59
Fit for school for physically defectives	..	..	..	..	..	..	..	1
Fit for grammar school	..	..	..	..	..	..	..	1
Left school over-age	..	..	..	..	..	..	..	4
Left city	..	..	..	..	..	..	..	1
Transferred to hospital	..	..	..	..	..	..	..	1
Private school	..	..	..	..	..	..	..	1

The purpose and function of this residential school for children recovering from rheumatism, chorea or heart disease, have been fully discussed in previous reports.

The following extracts from 'Hospital Survey, The Hospitals Service of the Sheffield and Midlands Area,' the report of an investigation by the Ministry of Health, are of interest.

"We consider that supervision should be made for the prolonged treatment of patients with Rheumatic Carditis of the type now available at Ash House, Sheffield . . . we consider that the work now undertaken at Sheffield should be expanded and facilities should be made available for the whole of the northern part of the area . . . for the greater part of the area there is no provision at all. Use is made of facilities provided by other centres outside the area, but there is no organised plan for the reception of these long-stay cases and their rehabilitation . . . unless provision of this kind is made, adequate care will not be available for early cases of Rheumatic Heart Disease which might be cured, or in which cardiac damage might be minimised by a sufficiently long stay in suitable surroundings with appropriate supervision and appropriately graded exercises."

In conclusion, it is again a pleasure to acknowledge the generous services and willing help of the visiting physician, Dr. Bösenberg of the Children's Hospital, who contributes the following note :—

“ Ash House has now completed its sixth year. What a change has been brought about in the outlook for a child suffering from rheumatism !

Before Ash House was opened, any child so afflicted had little to look forward to but repeated admission to Hospital, getting progressively worse each time. Now a great majority of those lucky enough to be admitted to Ash House have a very good prospect of returning to a normal life.

Since Ash House was opened only 2·5 per cent. of the children have required re-admission. Most of the remainder are now leading an un-restricted life, and many have begun to earn their own living on an equal footing with their healthy fellows.

Unfortunately the waiting list for admission to Ash House is growing, and with the rise in the number of cases of acute rheumatism this Winter, the need for an increase in the accommodation at Ash House is marked.”

The work undertaken during the year with the children following special reports on their school attainments, are shown below :—

Results of examinations.

Recommended for admission to day special school	92
Recommended for admission to residential special school	8
Found educationally subnormal, but allowed to remain at the ordinary school under special circumstances	4
Found dull and backward and continued in attendance at the ordinary school	33
Found educationally subnormal and unfit for ordinary or special school	27
Found educationally subnormal—for further consideration	1
Found to be epileptic	3

Analysis of children leaving the special schools for educationally sub-normal.

Allowed to leave before 16 years of age	8
Left on attaining the age of 16	23
Reported to be incapable of receiving further benefit	15
Reported to be detrimental	2
Admitted to day school for the deaf	1

REPORTED TO LOCAL AUTHORITY.

	Boys.	Girls.
Children incapable of receiving benefit from instruction in a special school	15	22
Children unable to be instructed in a special school without detriment to the interests of other children	2	2
Educationally subnormal children reported on leaving a special school on or before attaining the age of 16	15	8

The Voluntary Association for Mental Welfare undertakes the visitation and supervision of the ex-pupils of the special schools who have not been officially reported to the Mental Deficiency Committee. The number this year is 199. Reports are obtained from the Voluntary Association twice a year.

The school medical officers pay regular visits to all the special schools for the purpose of routine and survey examinations.

DENTAL TREATMENT.

Dental inspection and treatment were carried out in the special schools, including the open-air schools and King Edward VII Hospital School. The acceptance rate for this group was 72 per cent.

NUMBER OF CHILDREN INSPECTED BY THE DENTISTS :—

(a) ROUTINE AGE-GROUPS :—

Age	5	6	7	8	9	10	11	12	13	14 & over	Total
Number	38	12	24	50	68	75	120	104	105	58	654

(b) SPECIALS 88

(c) TOTAL (Routine and Specials) 742

Number found to require treatment 349

Number actually treated 228

Attendances made by the children for treatment 281

Fillings—Permanent teeth	..	..	..	..	..	..	..	..	..	33	
Temporary teeth	..	..	..	..	..	..	..	..	..	1	34
										<u> </u>	

Extractions—Permanent teeth	..	..	..	..	..	..	..	..	..	79	
Temporary teeth	..	..	..	..	..	..	..	..	..	288	367
										<u> </u>	

Administrations of general anæsthetics for extractions 184

Other operations—Permanent teeth	..	..	..	..	..	..	..	..	..	38	
Temporary teeth	..	..	..	..	..	..	..	..	..	7	45
										<u> </u>	

PARTICULARS OF CHILDREN WHO ARE MAINTAINED IN RESIDENTIAL SPECIAL SCHOOLS, DECEMBER, 1945

EPILEPTIC CHILDREN.	Boys.	Girls.	Total.
Chalfont St. Peter Colony, Bucks.	3	—	3
Soss Moss Residential School for Epileptic Children, Manchester ..	4	2	6
The Maghull Home for Epileptics, Liverpool	1	2	3
			<u> </u>
			12
			<u> </u>
EDUCATIONALLY SUBNORMAL CHILDREN.			
The Beacon School, Lichfield	5	—	5
Monyhull Colony, Birmingham	—	2	2
Besford Court Catholic Mental Welfare Hospital, Worcester ..	4	—	4
The Ogmores Camp School, Bridgend	3	—	3
The Mary Dendy Home, Sandlebridge.. .. .	1	—	1
			<u> </u>
			15
			<u> </u>

DEAF CHILDREN.

St. John's Institution for Deaf and Dumb, Boston Spa	1	2	3
Royal Residential Schools for the Deaf, Manchester	1	—	1
The Royal Cross School for the Deaf, Preston	1	—	1
Deaf and Dumb Institution, Derby	1	—	1
			<hr/> 6

BLIND CHILDREN.

Sheffield Royal Blind School	7	4	11
Royal Normal College for the Blind, Rowton Castle	—	1	1
			<hr/> 12

DELICATE CHILDREN.

Liverpool Open Air Hospital, Leasowe	2	1	3
			<hr/>

MALADJUSTED CHILDREN.

Dunnow Hall, Newton-in-Bowland	2	2	4
Red Hill School, East Sutton	—	1	1
Sourhall Hostel, Todmorden	1	—	1
Golf House Hostel, Bridlington	1	—	1
Belmont Hostel, Otley	1	—	1
			<hr/> 8

AFTER CARE

The purpose and principles underlying after-care of handicapped pupils and the functions of the After-Care Officer have been described in previous reports. Mrs. Stuart, the After-Care Officer who had given excellent service, resigned in March and Miss Bailey was appointed to fill the vacancy in April.

Administrative Memorandum No. 94 of the Ministry of Education relating to the choice of employment for handicapped children was issued in October, 1945. The Memorandum drew attention to the coming into operation of the Disabled Persons (Employment) Act, 1944, and the setting up under this Act, of a Register of Disabled Persons, thus improving the opportunities for suitable employment of disabled children.

In order that advantage may be taken of the extended facilities so afforded, the Ministry of Labour and National Service is anxious that its local offices, juvenile employment bureaux, and in certain cases members of disablement advisory committees or of their panels should be furnished with up-to-date educational and medical records of all children leaving special schools and all those leaving other schools who suffer from a temporary or permanent disability which may restrict their choice of employment.

Where the school medical officer is of the opinion that the child may be eligible for registration under the Disabled Persons (Employment) Act, a special form is to be completed with the consent of the parent. In this connection, parents are to be informed of the improved possibilities of ordinary employment for handicapped persons afforded by the Act, and of the increased facilities for sheltered employment which will be available to registered disabled persons only.

During the year 435 visits were paid by the After-Care Officer to 294 cases under the age of 21 years. Of these 42 were ex-pupils of the schools for the educationally sub-normal; 16 were children who had been recommended for such schools but had attended private schools, etc.; 36 were deaf; 20 partially-sighted; 70 physical defectives other than cripples and 110 ex-pupils of open-air schools.

EMPLOYMENT, &c., OF EX-PUPILS OF SPECIAL SCHOOLS.

	Educationally Sub-normal		Deaf		Partially Sighted		Physical Defectives		Open-air		Total
	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	
Learning a definite trade ..	1	9	7	6	2	4	11	10	20	19	89
In semi or unskilled work ..	21	11	14	9	7	5	18	18	26	29	158
At home, hospital, further education, etc. ..	9	3	—	—	1	—	9	2	9	3	36
In the Armed Forces ..	—	2	—	—	—	—	—	—	—	—	2
Occupation unknown ..	2	—	—	—	1	—	2	—	2	2	9
	33	25	21	15	11	9	40	30	57	53	294
Office and general clerical work	—	—	2	—	—	—	2	3	7	5	19
Telephone Switch Board Operator, Receptionist ..	—	—	—	—	1	—	—	—	1	—	2
Shop Assistant ..	—	1	—	—	—	—	6	—	6	2	15
Butcher's Assistant ..	—	—	—	—	—	1	—	1	—	—	2
Farmwork, Land Army ..	—	—	—	1	1	—	—	—	—	2	4
Gardening, groundsman ..	—	—	—	2	—	—	—	1	—	4	7
Timber felling ..	—	—	—	—	—	1	—	—	—	—	1
Lorry mate, van and errand boy ..	—	2	—	—	—	1	—	4	—	4	11
Milk delivery ..	—	1	—	—	—	—	—	—	—	2	3
Packing and warehouse work	7	—	4	1	1	1	4	3	7	3	31
Factory work—on machines ..	6	4	5	3	2	1	3	3	8	2	37
Electric sewing machinists ..	1	—	—	—	—	—	—	—	5	—	6
Dressmaking, Tailoring ..	—	—	1	—	—	—	2	—	1	—	4
Workroom—alteration hands ..	—	—	—	—	—	—	1	—	2	—	3
Domestic work, nurse-maids ..	1	—	2	—	—	—	—	—	3	—	6
Cook ..	—	—	1	—	—	—	—	—	—	—	1
Bakehouse ..	—	—	1	—	—	—	1	—	1	—	3
Canteen and Kitchen work ..	2	—	—	—	2	—	2	—	1	—	7
Waitress ..	1	—	—	—	—	—	—	—	1	—	2
Sweet-making, bottling, canning ..	3	—	—	—	1	—	—	—	2	1	7
Property Repairer, Plumber ..	—	—	—	1	—	—	1	—	—	2	4
Painting and Decorating ..	—	—	—	—	—	—	—	—	—	1	1
Furnace work, rolling mills, foundry work, grinding, hardening ..	—	2	—	3	—	—	—	1	—	4	10
General Labouring ..	—	—	—	1	—	1	—	2	—	4	8
Steel Weigher ..	—	1	—	—	—	—	—	—	—	—	1
Boot and Shoe Repairer ..	—	2	—	—	—	—	—	1	—	—	3
Surgical Boot-making ..	—	—	—	1	—	—	—	—	—	—	1
Upholstering ..	—	1	—	—	—	—	—	—	—	—	1
Laundry work ..	1	—	—	—	—	—	1	—	—	—	2
Pit surface workers ..	—	2	—	—	—	—	—	—	—	—	2
Cutlery trade ..	—	—	4	—	2	—	4	2	—	1	13
Plastic work ..	—	1	—	—	—	—	—	2	—	—	3
Tractor, Crane Driver ..	—	2	—	—	—	—	—	—	—	—	2
Elec. Engineering, Electrician ..	—	—	—	—	—	1	—	—	—	2	3
Wood turning, joinery, cabinet case and box making ..	—	—	1	—	—	—	—	—	2	3	6
Asphalter ..	—	—	—	—	—	—	—	—	1	1	1
Printing, Bookbinding ..	1	—	—	1	—	—	2	1	1	1	7
Mark making ..	—	—	—	—	—	—	—	1	—	—	2
Fitting, Turning, Mould, Core and Pattern making ..	—	1	—	—	—	2	—	—	—	2	5
Attendant in stores, cinema and E.A.I. ..	—	—	—	—	—	—	1	2	—	—	3
Window-cleaning ..	—	—	—	—	—	—	—	1	—	—	1
Etching saw-blades, etc. ..	—	—	—	—	—	—	1	—	—	—	1
Basket work ..	1	—	—	1	—	—	—	—	—	1	3
Kennel Assistant ..	—	—	—	—	—	—	—	—	—	1	1
Wholesale Fruit Market ..	—	—	—	—	—	—	—	—	1	—	1
At Commercial School ..	—	—	—	—	—	—	—	—	—	1	1
In Epileptic Colony Hospital ..	—	1	—	—	—	—	—	—	—	1	2
In Armed Forces ..	—	2	—	—	—	—	—	—	—	—	2
At home ..	9	2	—	—	1	—	9	2	8	2	33
	33	25	21	15	11	9	40	30	57	53	294

FULL TIME COURSES OF HIGHER EDUCATION FOR HANDICAPPED STUDENTS.

The training of blind persons in Craftwork has been continued throughout the year by the Education Committee at the Sheffield Corporation Workshops for the Blind, in accordance with the Scheme of the City Council.

In addition instruction in General Educational Subjects has been provided.

The following table indicates the number of new entrants for training and the number of trainees transferred to employment during the year.

	MEN		WOMEN		Total
	From City	Out of City	From City	Out of City	
Number on books at January 1st, 1945	10	1	5	—	16
New admissions	—	1	—	—	1
Withdrawn—completed training	3	—	2	—	5
Released from training	—	—	1	—	1
Number on books at December 31st, 1945 ..	7	2	2	—	11

The annual medical inspection was carried out during the year, and the defects discovered received treatment.

The Sheffield Authority has made a grant towards the maintenance of a blind student at St. Edmund Hall, Oxford, who is taking a degree course in Law. Two youths are being maintained at the Derwen Cripples' Training College, Oswestry.

MISCELLANEOUS.

HEALTH EDUCATION.

There have been no material changes in the teaching of hygiene in the schools.

Students in training from the Department of Education at the University visited the school clinics and the various special schools during the year. Demonstrations and lectures were given by the School Medical Officer. Talks on the school health services have been given to guilds and societies, including Parent-Teacher Associations by Dr. Taylor and the School Medical Officer.

BOYS' REMAND HOME.

The Boys' Remand Home was re-opened in April, 1945, at Shirecliffe House, and the particulars given below relate to a period of eight months.

Reasons for admission :—

Out of control, plus :—									
1. Truanting	..	..	..	..	..	..	..	..	6
2. Theft	..	..	..	..	..	..	..	..	3
3. Running away	..	..	..	..	..	..	..	..	6
Absconders from Schools and Institutions				..	..	..	..	..	6
Larceny	..	..	..	..	..	..	..	..	15
Housebreaking	..	..	..	..	..	..	..	..	20
In need of care and protection		..	..	..	..	..	..	..	1
Arson	..	..	..	..	..	..	..	..	2
Doping greyhounds		..	..	..	..	..	..	..	1
Breach of recognizance		..	..	..	..	..	..	..	5
Driving cars away		..	..	..	..	..	..	..	1
Wilful damage		..	..	..	..	..	..	..	1

All the boys were medically examined before admission, and the Home has been regularly visited by a medical officer. The following conditions which occurred during the year were treated at the Home :—

[illegible]

One boy received treatment at the Royal Hospital for a fractured thumb.

One boy had teeth extracted at the School Clinic.

Each boy's head was carefully cleansed on admission and it was found during this period 15 per cent. had lousy heads.

The School Medical Officer again desires to express his appreciation of the effective help given during the year by the Superintendent and Matron in carrying out the treatment prescribed.

GIRLS' REMAND HOME.

During the year, 30 girls were resident in the Home for varying periods.

The reasons for admission are as follows :—

[illegible]

The girls were medically examined on admission, and the Home is visited by a medical officer as required. A number of the girls have been examined at the Jessop Hospital on the recommendation of the medical officer. Three girls were found to be suffering from venereal disease and were removed to special homes.

The following conditions have been treated in the Home :—

Common cold	1
Crushed toe nail	1
Anaemia	1
Septic knee	1

Two girls had teeth extracted at the School Clinic, and one girl had her tonsils removed at the Royal Hospital.

It was found that 50 per cent. of the girls had verminous heads on admission.

The School Medical Officer again desires to express his appreciation of the help extended by the staff of the Jessop Hospital, and to record the effective assistance given by the Matron.

SPECIAL EXAMINATIONS

Special examinations have been carried out as follows :—

Candidates for appointment in the service of the Education Committee ..	72
Examination for Stage Licence	1
Juvenile Court Cases	221
For admission to Approved Schools	39
Fitness for newspaper delivery	484
Fitness of school applicants for agricultural employment	163
Quarterly medical examination of " Boarded-out " children	54
Special examinations re fitness for Camp	122

EMPLOYMENT OF CHILDREN

The following table which has been furnished by the Superintendent of Education Welfare Officers, gives particulars of applications for part-time employment of school children :—

Nature of Employment :—	Boys.	Girls.	Total.
News delivery (mornings only)	39	3	42
„ (evenings only)	17	6	23
„ (mornings and evenings)	125	33	158
„ (mornings, evenings and Sundays)	201	27	228
„ (Sundays only)	2	—	2
„ (mornings and Sundays)	17	2	19
„ (evenings and Sundays)	11	1	12
	<u>412</u>	<u>72</u>	<u>484</u>

Errands for—

Grocers	29	—	29
Greengrocers	7	—	7
Butchers	30	—	30
Bakers and confectioners	4	—	4
Chemists	—	1	1
Fishmongers	1	—	1
Ironmongers	2	—	2
Tailors	1	—	1
Shoe repairers	1	—	1
Drapers	—	1	1
Miscellaneous	4	—	4
	<u>79</u>	<u>2</u>	<u>81</u>

Applications refused or cancelled—

Medically unfit	8	—	8
Secondary School children	6	—	6
Under age	2	—	2
Cancelled by employer or parents	28	3	31
	<u>44</u>	<u>3</u>	<u>47</u>

PARENTS' PAYMENTS

It has been customary to mention the amount which parents have contributed on a voluntary basis at the various clinics. As indicated at the beginning of the report, Section 48 (3) of the Education Act abolishes payment for services rendered under the Authority's schemes, and therefore no further contributions were accepted after 31st March.

The amount received under the scheme of voluntary payment from January to the end of March was £189 11s. 2d.

MEDICAL INSPECTION AND TREATMENT RETURNS

YEAR ENDED 31ST DECEMBER, 1945

PRIMARY AND SECONDARY SCHOOLS

TABLE I.

A—ROUTINE MEDICAL INSPECTIONS

Number of Inspections in the prescribed Groups—

Entrants	..	..	..	..	..	..	5,777
Second Age Group	..	..	..	..	..	..	—
Third Age Group	..	..	..	..	..	..	4,641
TOTAL	..	..	..	..	..	..	10,418
Number of other Routine Inspections	..	..	..	..	..	..	948
GRAND TOTAL	..	..	..	..	..	..	11,366

B—OTHER INSPECTIONS

Number of Special Inspections and

Re-Inspections	107,474
----------------	----	----	----	----	----	----	---------

TABLE II.

CLASSIFICATION OF THE NUTRITION OF CHILDREN INSPECTED DURING THE YEAR IN THE ROUTINE AGE GROUPS

Number of Children Inspected	A (Excellent)		B (Normal)		C (Slightly sub-normal)		D (Bad)	
	No.	%	No.	%	No.	%	No.	%
11,366	2,287	20·12	7,730	68·01	1,318	11·59	31	0·27

TABLE III.

TREATMENT OF DEFECTS CARRIED OUT UNDER THE
AUTHORITY'S SCHEME

GROUP I.—TREATMENT OF MINOR AILMENTS

(excluding Uncleanliness, for which see Table V.)

Total number of defects treated or under treatment during the year under the
Authority's Scheme 26,292

GROUP II.—TREATMENT OF DEFECTIVE VISION AND SQUINT

(excluding Minor Eye Defects treated as Minor Ailments—Group I.).

	Under the Authority's Scheme
Errors of Refraction (including squint)	4,706
Other defect or disease of the eyes (excluding those recorded in Group I) ..	47
Total	4,753
Number of children for whom spectacles were—	
(a) Prescribed	1,699
(b) Obtained	1,779

TABLE IV.

DENTAL INSPECTION AND TREATMENT

(1) Number of children inspected by the Dentists.

(a) ROUTINE AGE-GROUPS

Age	5	6	7	8	9	10	11	12	13	14	15	16 and over	Total
Number	3890	3983	3722	3979	3329	3619	3456	3216	3246	891	594	357	34,281

(b) SPECIALS	5,118
(c) TOTAL (Routine and Specials)	39,400
(2) Number found to require treatment	25,763
(3) Number actually treated	14,813
(4) Attendances made by children for treatment	24,007
(5) Half-days devoted to :—	
Inspection	271
Treatment	2,577
TOTAL	2,848
(6) Fillings :—	
Permanent teeth	6,169
Temporary teeth	37
TOTAL	6,206
(7) Extractions :—	
Permanent teeth	3,402
Temporary teeth	19,652
TOTAL	23,054
(8) Administrations of general anæsthetics for extractions	13,694
(9) Other Operations :—	
Permanent teeth	5,177
Temporary teeth	104
TOTAL	5,281

TABLE V.

VERMINOUS CONDITIONS

(i) Average number of visits per school made during the year by the School Nurses or other authorised persons	15.78
(ii) Total number of examinations of children in the Schools by School Nurses or other authorised persons	145,010
(iii) Number of individual children found unclean	8,042

ATTENDANCES AT CLINICS

	Atter-cliffe	Pitsmoor	Hills-borough	Heeley	Central (E)	Central (F)	Handsworth	Woodhouse	Shiregreen	Manor	Wise-wood	Southey Green	Wybourn	Special Depts.	Total
Inspection Clinic	5,909	3,630	2,762	2,792	1,706	1,631	899	759	3,057	5,611	1,060	1,060	2,534	42	33,452
Minor Ailments Clinic ..	6,530	4,215	2,892	4,233	3,292	2,198	1,210	650	4,961	5,433	1,394	698	5,375	1,207	44,288
Child Guidance Clinic ..	—	—	—	—	—	—	—	—	—	—	—	—	—	2,601	2,601
Speech Therapy Clinic ..	—	—	—	—	—	—	—	—	—	—	—	—	—	2,668	2,668
Treatment Clinics—															
Ophthalmic	—	—	—	—	—	—	—	—	—	—	—	—	—	9,159	9,159
Orthoptic	—	—	—	—	—	—	—	—	—	—	—	—	—	2,998	2,998
Aural	—	—	—	—	—	—	—	—	—	—	—	—	—	743	743
Dental (Central and Branch)	—	—	—	—	—	—	—	—	—	—	—	—	—	24,288	24,288
Orthopaedic	—	—	—	—	—	—	—	—	—	—	—	—	—	696	696
Rheumatism and Heart	—	—	—	—	—	—	—	—	—	—	—	—	—	1,105	1,105
Immunization	—	—	—	—	—	—	—	—	—	—	—	—	—	8,279	8,279
Dressings by Nurse—															
Eye cases	750	820	1,033	1,099	1,281	146	107	107	1,098	869	703	462	855	2,718	11,941
Ear cases	2,595	2,039	2,301	2,361	3,621	360	217	217	2,775	1,949	643	566	1,149	5,970	26,546
Minor surgical cases ..	7,782	7,445	7,163	8,037	9,293	1,277	2,035	2,035	7,446	10,892	3,135	6,563	6,391	34,855	112,314
	23,566	18,149	16,151	18,522	23,022	3,892	3,768	3,768	19,337	24,754	6,935	9,349	16,304	97,329	281,078

SCHOOL HEALTH SERVICE

COST

The following particulars are furnished as to the cost of the School Health Service during the financial year ended 31st March, 1945 :—

SECTION	Gross Expenditure		Income from Local Sources (other than Rates)		Net Expenditure ranking for Grant		Net Cost to Rates after deducting Government Grant, &c.		Cost in terms of Penny Rate	
	£	s. d.	£	s. d.	£	s. d.	£	s. d.	Gross Cost	Net Cost to Rates
Medical Inspection and Treatment	37,233	14 4	967	10 11	36,266	3 5	18,322	16 7	2.78	1.37
Ablutionary Baths	620	13 1	—		620	13 1	313	11 6	.05	.02
Special Schools	48,310	14 6	2,883	10 11	45,427	3 7	22,951	5 4	3.61	1.71
TOTALS	£ 86,165	1 11	3,851	1 10	82,314	0 1	41,587	13 5	6.44	3.10

